



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

Write or Type Committee Name  
BLACK REPUBLICAN PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		8942.99
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	91484.04									
(c) Total Receipts (from Line 19) .....	215300.08	1187013.34								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	306784.12	1195956.33								
7. Total Disbursements (from Line 31) .....	277155.59	1166327.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	29628.53	29628.53								
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) .....	149442.67									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
BLACK REPUBLICAN PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	70365.00	260470.50
(ii) Unitemized .....	144935.08	926183.01
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	215300.08	1186653.51
(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) .....	215300.08	1186653.51
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	359.83
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)) .....	215300.08	1187013.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	215300.08	1187013.34

**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.....	273155.59	1141812.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	273155.59	1141812.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	7000.00
24. Independent Expenditure (use Schedule E) .....	0.00	11690.00
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	5825.00
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))..	277155.59	1166327.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	277155.59	1166327.80

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	215300.08	1186653.51
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	215300.08	1186653.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	273155.59	1141812.80
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	359.83
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	273155.59	1141452.97

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

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

FOR LINE NUMBER: PAGE 6 / 177

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)  
MISS GERTRUDE L AGOGLIA 112

Mailing Address PO BOX 150596

City State Zip Code  
BROOKLYN NY 11215

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) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.62046

Amount of Each Receipt this Period

100.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
MS MARIE ALLEN 838

Mailing Address 1552 PARADISE VALLEY RD

City State Zip Code  
BONNERS FERRY ID 83805

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 215.00

Date of Receipt

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

Transaction ID: SA11AI.60767

Amount of Each Receipt this Period

25.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
MS MARIE ALLEN 838

Mailing Address 1552 PARADISE VALLEY RD

City State Zip Code  
BONNERS FERRY ID 83805

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.60768

Amount of Each Receipt this Period

35.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ▶

160.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 177</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) MS MARIE ALLEN 838	Date of Receipt MM / DD / YYYY 11 / 17 / 2008
	Mailing Address 1552 PARADISE VALLEY RD	<b>Transaction ID:</b> SA11AI.60766
	City State Zip Code BONNERS FERRY ID 83805	Amount of Each Receipt this Period 20.00
	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 ▼ 270.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR MAX ALTENBERN 816	Date of Receipt MM / DD / YYYY 11 / 18 / 2008
	Mailing Address 13098 COUNTY ROAD 204	<b>Transaction ID:</b> SA11AI.59786
	City State Zip Code DE BEQUE CO 81630	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation RANCHER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 248.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MRS BETTY ANDERSON 604	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 90 OLD CREEK RD	<b>Transaction ID:</b> SA11AI.61058
	City State Zip Code PALOS PARK IL 60464	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation NONE RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

<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: PAGE 8 / 177  
(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)  
MISS GERI ANDERSON 992

Mailing Address **3223 W LONGFELLOW AVE**

City **SPOKANE** State **WA** Zip Code **99205**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **10 / 24 / 2008**

**Transaction ID: SA11AI.59068**

Amount of Each Receipt this Period **225.00**

**B.** Full Name (Last, First, Middle Initial)  
MR ROGER ANDREW 546

Mailing Address **581 W MAIN ST**

City **LA FARGE** State **WI** Zip Code **54639**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 27 / 2008**

**Transaction ID: SA11AI.63081**

Amount of Each Receipt this Period **20.00**

**C.** Full Name (Last, First, Middle Initial)  
MR ROGER ANDREW 546

Mailing Address **581 W MAIN ST**

City **LA FARGE** State **WI** Zip Code **54639**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **11 / 12 / 2008**

**Transaction ID: SA11AI.60181**

Amount of Each Receipt this Period **15.00**

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 177

(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)  
MRS MARY D ARMISTEAD 282

Mailing Address 7113 CYPRESS CREEK LN

City State Zip Code  
CHARLOTTE NC 28210

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

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

Transaction ID: SA11AI.63866

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS MARY D ARMISTEAD 282

Mailing Address 7113 CYPRESS CREEK LN

City State Zip Code  
CHARLOTTE NC 28210

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

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

Transaction ID: SA11AI.63867

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS GERTRUDE ARNOLD 487

Mailing Address 1727 W HOPPE RD

City State Zip Code  
UNIONVILLE MI 48767

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 ▼ 415.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.56721

Amount of Each Receipt this Period

150.00

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 177

(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)  
MRS GERTRUDE ARNOLD 487

Mailing Address 1727 W HOPPE RD

City State Zip Code  
UNIONVILLE MI 48767

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) ▼ 540.00

Date of Receipt

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

Transaction ID: SA11AI.56722

Amount of Each Receipt this Period

125.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
MR GLENN ARTHUR 063

Mailing Address 10 ROBINHOOD DR

City State Zip Code  
GALES FERRY CT 06335

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.61809

Amount of Each Receipt this Period

250.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
ALBERT A AVEDIKIAN 936

Mailing Address 920 10TH AVE

City State Zip Code  
KINGSBURG CA 93631

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) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.56689

Amount of Each Receipt this Period

100.00
--------

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

475.00
--------

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

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 177  
(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)  
ALBERT A AVEDIKIAN 936

Mailing Address 920 10TH AVE

City Kingsburg State CA Zip Code 93631

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: 10 / 31 / 2008  
**Transaction ID: SA11AI.56690**  
 Amount of Each Receipt this Period: 50.00

**B.**

Full Name (Last, First, Middle Initial)  
MR DONALD BAILEY 810

Mailing Address 881 COLLEGE ST

City Springfield State CO Zip Code 81073

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 24 / 2008  
**Transaction ID: SA11AI.59714**  
 Amount of Each Receipt this Period: 500.00

**C.**

Full Name (Last, First, Middle Initial)  
STEPHEN BARILOVITS 296, JR

Mailing Address PO BOX 222

City Mauldin State SC Zip Code 29662

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt: 10 / 22 / 2008  
**Transaction ID: SA11AI.59930**  
 Amount of Each Receipt this Period: 100.00

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

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

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

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

FOR LINE NUMBER: PAGE 12 / 177  
(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)  
STEPHEN BARILOVITS 296, JR  
Mailing Address PO BOX 222

City MAULDIN State SC Zip Code 29662

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 363.00

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

**Transaction ID:** SA11AI.59931

Amount of Each Receipt this Period 75.00

**B.** Full Name (Last, First, Middle Initial)  
STEPHEN BARILOVITS 296, JR  
Mailing Address PO BOX 222

City MAULDIN State SC Zip Code 29662

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 513.00

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

**Transaction ID:** SA11AI.59932

Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
MRS BLAKESLEE BARNES 100  
Mailing Address 165 CHRISTOPHER ST APT 6CC

City NEW YORK State NY Zip Code 10014

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

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

**Transaction ID:** SA11AI.60055

Amount of Each Receipt this Period 50.00

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

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

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

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

FOR LINE NUMBER: PAGE 13 / 177  
(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 BLAKESLEE BARNES 100  
Mailing Address 165 CHRISTOPHER ST APT 6CC  
City NEW YORK State NY Zip Code 10014  
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 10 / 27 / 2008  
Transaction ID: SA11AI.60057  
Amount of Each Receipt this Period 35.00

**B.** Full Name (Last, First, Middle Initial)  
MRS BLAKESLEE BARNES 100  
Mailing Address 165 CHRISTOPHER ST APT 6CC  
City NEW YORK State NY Zip Code 10014  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 325.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.60056  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
MR CECIL BARNETT 402  
Mailing Address 126 INDIAN HILLS TRL  
City LOUISVILLE State KY Zip Code 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 11 / 03 / 2008  
Transaction ID: SA11AI.62470  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 335.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 177  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
MR JOHN H BAUMGARTNER 190, JR

Mailing Address 2886 HIGHLAND AVE

City State Zip Code  
**BROOMALL PA 19008**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

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

**Transaction ID: SA11AI.59500**

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MS CATHERINE M BEARD 294

Mailing Address 7 BAY CT

City State Zip Code  
**ISLE OF PALMS SC 29451**

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

Name of Employer Occupation  
NONE HOUSEWIFE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

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

**Transaction ID: SA11AI.59743**

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
DORIS L BECK 445

Mailing Address 7400 WEST BLVD

City State Zip Code  
**YOUNGSTOWN OH 44512**

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 ▼  
275.00

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

**Transaction ID: SA11AI.56430**

Amount of Each Receipt this Period  
100.00

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

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

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

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

FOR LINE NUMBER: PAGE 15 / 177  
(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)  
DORIS L BECK 445  
Mailing Address 7400 WEST BLVD

City State Zip Code  
YOUNGSTOWN OH 44512

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8  
Transaction ID: SA11AI.56429  
Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
MRS MARGARET E BECKER 115  
Mailing Address 29 SUMMIT AVE

City State Zip Code  
LYNBROOK NY 11563

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 8  
Transaction ID: SA11AI.58176  
Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
MR RAOUL BECNEL 712  
Mailing Address 266 GREER RD

City State Zip Code  
WEST MONROE LA 71292

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 ▼ 213.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 8  
Transaction ID: SA11AI.60384  
Amount of Each Receipt this Period 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 385.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 177  
(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 RAOUL BECNEL 712  
Mailing Address 266 GREER RD  
City WEST MONROE State LA Zip Code 71292  
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 ▼ 233.00  
Date of Receipt 11 / 18 / 2008  
Transaction ID: SA11AI.60385  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
MR MAXWELL BELDING 063  
Mailing Address 28 SMITHS NECK RD  
City OLD LYME State CT Zip Code 06371  
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 11 / 20 / 2008  
Transaction ID: SA11AI.61817  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
MRS E C BERNSTORF 370  
Mailing Address 6023 CLOVERDALE DR  
City BRENTWOOD State TN Zip Code 37027  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 240.00  
Date of Receipt 10 / 22 / 2008  
Transaction ID: SA11AI.62371  
Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 420.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 17 / 177  
(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 E C BERNSTORF 370  
Mailing Address 6023 CLOVERDALE DR  
City BRENTWOOD State TN Zip Code 37027  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 340.00  
Date of Receipt 11 / 03 / 2008  
Transaction ID: SA11AI.62372  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR LEROY K BERRETT 932  
Mailing Address PO BOX 1129  
City HANFORD State CA Zip Code 93232  
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 11 / 19 / 2008  
Transaction ID: SA11AI.56929  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
DAVID M BISHOP 917  
Mailing Address 107 AMBLESIDE WAY  
City GLENDORA State CA Zip Code 91741  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.00  
Date of Receipt 11 / 18 / 2008  
Transaction ID: SA11AI.56706  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 250.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 18 / 177  
(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 WESLEY BLASJO 925  
Mailing Address 14130 DESCANSO DR

City State Zip Code  
PERRIS CA 92570

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 ▼ 550.00

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

Transaction ID: SA11AI.58518

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
MR WESLEY BLASJO 925  
Mailing Address 14130 DESCANSO DR

City State Zip Code  
PERRIS CA 92570

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: SA11AI.58517

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
MR J C BONE 424  
Mailing Address 1413 ROSE CREEK RD

City State Zip Code  
MADISONVILLE KY 42431

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 ▼ 700.00

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

Transaction ID: SA11AI.59450

Amount of Each Receipt this Period  
100.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 177  
(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)  
MARK E BORGERDING 563

Mailing Address PO BOX 510

City State Zip Code  
**BELGRADE MN 56312**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 27 / 2008**

**Transaction ID: SA11AI.59622**

Amount of Each Receipt this Period  
**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR CLIFTON P BOUTELLE 836

Mailing Address 2821 ERIN AVE

City State Zip Code  
**NAMPA ID 83686**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 20 / 2008**

**Transaction ID: SA11AI.60762**

Amount of Each Receipt this Period  
**50.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR DOUGLAS BRACKNEY 972

Mailing Address 12215 SW KING RICHARD DR

City State Zip Code  
**PORTLAND OR 97224**

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 ▼ **210.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 / 03 / 2008**

**Transaction ID: SA11AI.58897**

Amount of Each Receipt this Period  
**50.00**

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

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

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

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

FOR LINE NUMBER: PAGE 20 / 177  
(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 HOWARD BRAITMAN 191  
Mailing Address 250 S 18TH ST  
City PHILADELPHIA State PA Zip Code 19103  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF EMPLOYED Occupation CERTIFIED PUBLIC ACCOUNTANT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 10 / 23 / 2008  
Transaction ID: SA11AI.63809  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR PHIL BRANDIS 641  
Mailing Address 9813 NW VIEW COVES DR  
City KANSAS CITY State MO Zip Code 64152  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BAYER Occupation ENGINEER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 545.00  
Date of Receipt 10 / 16 / 2008  
Transaction ID: SA11AI.59119  
Amount of Each Receipt this Period 25.00

**C.** Full Name (Last, First, Middle Initial)  
MR PHIL BRANDIS 641  
Mailing Address 9813 NW VIEW COVES DR  
City KANSAS CITY State MO Zip Code 64152  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BAYER Occupation ENGINEER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 620.00  
Date of Receipt 10 / 16 / 2008  
Transaction ID: SA11AI.59121  
Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 200.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 177  
(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 PHIL BRANDIS 641

Mailing Address 9813 NW VIEW COVES DR

City State Zip Code  
**KANSAS CITY MO 64152**

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

Name of Employer Occupation  
**BAYER ENGINEER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **720.00**

Date of Receipt **11 / 03 / 2008**

**Transaction ID: SA11AI.59120**

Amount of Each Receipt this Period **100.00**

**B.** Full Name (Last, First, Middle Initial)  
MR MAURICE BRINKMAN 773

Mailing Address 112 ELKINS LK

City State Zip Code  
**HUNTSVILLE TX 77340**

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **11 / 18 / 2008**

**Transaction ID: SA11AI.60624**

Amount of Each Receipt this Period **25.00**

**C.** Full Name (Last, First, Middle Initial)  
MR J DONALD BROWN 229

Mailing Address 2061 HAMPTON DR

City State Zip Code  
**WAYNESBORO VA 22980**

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 ▼ **750.00**

Date of Receipt **10 / 27 / 2008**

**Transaction ID: SA11AI.63267**

Amount of Each Receipt this Period **300.00**

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

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

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

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

FOR LINE NUMBER: PAGE 22 / 177  
(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 STUART BROWN 438  
Mailing Address 23780 TOWNSHIP ROAD 167  
City FRESNO State OH Zip Code 43824  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 10 / 17 / 2008  
Transaction ID: SA11AI.59939  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MRS BARBARA BROWN 727  
Mailing Address PO BOX 1098  
City PRAIRIE GROVE State AR Zip Code 72753  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: SA11AI.60415  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
MR HENRY J BRUCKER 079  
Mailing Address 7103 FELLOWSHIP RD  
City BASKING RIDGE State NJ Zip Code 07920  
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 10 / 24 / 2008  
Transaction ID: SA11AI.59659  
Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 550.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 23 / 177  
(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 BARTON BULMAN 559  
Mailing Address 11500 GOLDENROD RD  
City CALEDONIA State MN Zip Code 55921  
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 ▼ 800.00  
Date of Receipt 11 / 03 / 2008  
Transaction ID: SA11AI.60278  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MRS MARY M BUOL 193  
Mailing Address 1008 DUNVEGAN RD  
City WEST CHESTER State PA Zip Code 19382  
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 ▼ 301.00  
Date of Receipt 10 / 23 / 2008  
Transaction ID: SA11AI.63836  
Amount of Each Receipt this Period 201.00

**C.** Full Name (Last, First, Middle Initial)  
MRS MARY M BUOL 193  
Mailing Address 1008 DUNVEGAN RD  
City WEST CHESTER State PA Zip Code 19382  
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 ▼ 501.00  
Date of Receipt 11 / 03 / 2008  
Transaction ID: SA11AI.63835  
Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 501.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 177

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)  
REV EDWARD C BURCH 705

Mailing Address 112 SOMMERSET DR

City State Zip Code  
LAFAYETTE LA 70506

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

Name of Employer Occupation  
CLERGY

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 323.00

Date of Receipt

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

Transaction ID: SA11AI.56628

Amount of Each Receipt this Period

248.00

**B.**

Full Name (Last, First, Middle Initial)  
ARTHUR W CARLSON 320

Mailing Address 116 PLANTERS ROW E

City State Zip Code  
PONTE VEDRA BEACH FL 32082

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.57758

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
MR R M CARPENTER 197, III

Mailing Address PO BOX 732

City State Zip Code  
MONTCHANIN DE 19710

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

Name of Employer Occupation  
SELF EMPLOYED INVESTOR

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

Date of Receipt

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

Transaction ID: SA11AI.56626

Amount of Each Receipt this Period

250.00

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

998.00

**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 25 / 177

(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)  
MS NANCY O CARSON 080

Mailing Address 283 MEDFORD LEAS

City State Zip Code  
MEDFORD NJ 08055

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  
1 0 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.56403

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)  
MS NANCY O CARSON 080

Mailing Address 283 MEDFORD LEAS

City State Zip Code  
MEDFORD NJ 08055

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

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

Transaction ID: SA11AI.56404

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)  
JEROME CASPER 210

Mailing Address 7665 SWEET HOURS WAY

City State Zip Code  
COLUMBIA MD 21046

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

Name of Employer Occupation  
SELF DENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

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

Transaction ID: SA11AI.63174

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 26 / 177  
(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 JAMES CASTEEL 296  
Mailing Address PO BOX 8404  
City GREENVILLE State SC Zip Code 29604  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.00  
Date of Receipt: MM / DD / YYYY 10 / 16 / 2008  
Transaction ID: SA11AI.63580  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES CASTEEL 296  
Mailing Address PO BOX 8404  
City GREENVILLE State SC Zip Code 29604  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00  
Date of Receipt: MM / DD / YYYY 10 / 23 / 2008  
Transaction ID: SA11AI.63581  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
MR JAMES CASTEEL 296  
Mailing Address PO BOX 8404  
City GREENVILLE State SC Zip Code 29604  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 310.00  
Date of Receipt: MM / DD / YYYY 11 / 17 / 2008  
Transaction ID: SA11AI.63582  
Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 125.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 177

(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)  
MS ANNIE M CASTEEL 306

Mailing Address 2720 DOSTER RD

City State Zip Code  
MADISON GA 30650

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

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

Transaction ID: SA11AI.59516

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
MR GEORGE CHALE 917

Mailing Address 1924 CERCO ALTA DR

City State Zip Code  
MONTEREY PARK CA 91754

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 ▼  
343.00

Date of Receipt

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

Transaction ID: SA11AI.61667

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
MR GEORGE CHALE 917

Mailing Address 1924 CERCO ALTA DR

City State Zip Code  
MONTEREY PARK CA 91754

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 ▼  
443.00

Date of Receipt

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

Transaction ID: SA11AI.61668

Amount of Each Receipt this Period

100.00

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 177  
(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 GEORGE CHALE 917  
Mailing Address 1924 CERCO ALTA DR  
City State Zip Code  
MONTEREY PARK CA 91754  
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 ▼ 543.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8  
Transaction ID: SA11AI.61666  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR GEORGE CHALE 917  
Mailing Address 1924 CERCO ALTA DR  
City State Zip Code  
MONTEREY PARK CA 91754  
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 ▼ 693.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 8  
Transaction ID: SA11AI.61669  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
MR DAVID H CLARK 442  
Mailing Address 6408 NEWTON FALLS RD  
City State Zip Code  
RAVENNA OH 44266  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 420.00  
Date of Receipt M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 8  
Transaction ID: SA11AI.62617  
Amount of Each Receipt this Period 250.00

**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 29 / 177

(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)  
MS PHYLLIS CLEVELAND 335

Mailing Address 39114 7TH AVE

City State Zip Code  
ZEPHYRHILLS FL 33542

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
335.00

Date of Receipt

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

Transaction ID: SA11AI.57496

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS BETTY S CLINE 296

Mailing Address 211 MILSTEAD WAY

City State Zip Code  
GREENVILLE SC 29615

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

Name of Employer Occupation  
DOCTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt

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

Transaction ID: SA11AI.63587

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
MR CHARLES CLINTON 152

Mailing Address 5103 MORNINGRISE DR

City State Zip Code  
PITTSBURGH PA 15236

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt

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

Transaction ID: SA11AI.58353

Amount of Each Receipt this Period

50.00

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 177

(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)  
MRS ELEARNOB COBB 900  
Mailing Address 131 S VISTA ST

City State Zip Code  
LOS ANGELES CA 90036

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) ▼ 300.00

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

Transaction ID: SA11AI.61100

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS ELIZABETH COCHRAN 070  
Mailing Address 459 PASSAIC AVE APT 306

City State Zip Code  
WEST CALDWELL NJ 07006

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) ▼ 3000.00

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

Transaction ID: SA11AI.61842

Amount of Each Receipt this Period  
1500.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS ELIZABETH COCHRAN 070  
Mailing Address 459 PASSAIC AVE APT 306

City State Zip Code  
WEST CALDWELL NJ 07006

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) ▼ 3600.00

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

Transaction ID: SA11AI.61841

Amount of Each Receipt this Period  
600.00

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

2300.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 177

(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 GEORGE W COMANICH 775

Mailing Address 5104 TAMARACH DR

City State Zip Code  
BAYTOWN TX 77521

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 ▼ 1025.00

Date of Receipt

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

Transaction ID: SA11AI.60647

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
MR GEORGE W COMANICH 775

Mailing Address 5104 TAMARACH DR

City State Zip Code  
BAYTOWN TX 77521

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 ▼ 1425.00

Date of Receipt

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

Transaction ID: SA11AI.60646

Amount of Each Receipt this Period  
400.00

**C.**

Full Name (Last, First, Middle Initial)  
MR WILLIAM A COONEY 220

Mailing Address 12502 SWEET LEAF TER

City State Zip Code  
FAIRFAX VA 22033

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

Name of Employer Occupation  
BOEING SYSTEMS ENGINEER

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

Date of Receipt

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

Transaction ID: SA11AI.63221

Amount of Each Receipt this Period  
75.00

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

775.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 177  
(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 JOSEPH T CORSO 080  
Mailing Address 116 HOWARD ST  
City RIVERTON State NJ Zip Code 08077  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 10 / 17 / 2008  
Transaction ID: SA11AI.61918  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR JOSEPH T CORSO 080  
Mailing Address 116 HOWARD ST  
City RIVERTON State NJ Zip Code 08077  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.61917  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
MISS BETTY COVELL 207  
Mailing Address 15707 BRADFORD DR  
City LAUREL State MD Zip Code 20707  
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 10 / 16 / 2008  
Transaction ID: SA11AI.63116  
Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 300.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 33 / 177  
(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)  
MISS WANDA CRAWLEY 629  
Mailing Address 1213 PRESTWICKE DR

City State Zip Code  
HERRIN IL 62948

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 0 / 2 0 0 8  
Transaction ID: SA11AI.61276  
Amount of Each Receipt this Period 40.00

**B.** Full Name (Last, First, Middle Initial)  
MISS WANDA CRAWLEY 629  
Mailing Address 1213 PRESTWICKE DR

City State Zip Code  
HERRIN IL 62948

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 ▼ 290.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 3 / 2 0 0 8  
Transaction ID: SA11AI.61277  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
MISS WANDA CRAWLEY 629  
Mailing Address 1213 PRESTWICKE DR

City State Zip Code  
HERRIN IL 62948

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 5 / 2 0 0 8  
Transaction ID: SA11AI.61278  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 140.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 177
	<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) MISS WANDA CRAWLEY 629		Date of Receipt																					
	Mailing Address 1213 PRESTWICKE DR		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	5		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		0	5		2	0	0	8														
	City State Zip Code <b>HERRIN IL 62948</b>		<b>Transaction ID: SA11AI.61280</b>																					
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 ▼ <b>375.00</b>		<table border="1"> <tr> <td colspan="10">35.00</td> </tr> </table>		35.00																				
35.00																								

<b>B.</b>	Full Name (Last, First, Middle Initial) MISS WANDA CRAWLEY 629		Date of Receipt																					
	Mailing Address 1213 PRESTWICKE DR		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	8		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		1	8		2	0	0	8														
	City State Zip Code <b>HERRIN IL 62948</b>		<b>Transaction ID: SA11AI.61279</b>																					
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 ▼ <b>410.00</b>		<table border="1"> <tr> <td colspan="10">35.00</td> </tr> </table>		35.00																				
35.00																								

<b>C.</b>	Full Name (Last, First, Middle Initial) DR ANDREW CROOK 950		Date of Receipt																					
	Mailing Address 2600 CASTELLO WAY		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	8		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		1	8		2	0	0	8														
	City State Zip Code <b>SANTA CLARA CA 95051</b>		<b>Transaction ID: SA11AI.56966</b>																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period																						
Name of Employer: LOCKHEED MARTIN Occupation: ENGINEER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <b>500.00</b>		<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>		300.00																				
300.00																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>370.00</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 35 / 177  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
MR ORIN CURRIE 740

Mailing Address 106 FLEETWOOD PL

City State Zip Code  
**BARTLESVILLE OK 74006**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**11 / 03 / 2008**

**Transaction ID: SA11AI.60459**

Amount of Each Receipt this Period  
**50.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR ORIN CURRIE 740

Mailing Address 106 FLEETWOOD PL

City State Zip Code  
**BARTLESVILLE OK 74006**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **255.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**11 / 18 / 2008**

**Transaction ID: SA11AI.60458**

Amount of Each Receipt this Period  
**50.00**

**C.**

Full Name (Last, First, Middle Initial)  
MRS MARJORIE DAVIS 043

Mailing Address 6 HUCKLEBERRY LN

City State Zip Code  
**AUGUSTA ME 04330**

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

Name of Employer NONE Occupation **NOT EMPLOYED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 30 / 2008**

**Transaction ID: SA11AI.61748**

Amount of Each Receipt this Period  
**400.00**

**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 36 / 177  
(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 D WILLIAM DEAN 681  
Mailing Address 8141 FARNAM DR APT 232  
City OMAHA State NE Zip Code 68114  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00  
Date of Receipt 11 / 18 / 2008  
Transaction ID: SA11AI.59129  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
MALEVA DEPALMA 221  
Mailing Address 937 MACKALL AVE  
City MC LEAN State VA Zip Code 22101  
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 10 / 31 / 2008  
Transaction ID: SA11AI.59816  
Amount of Each Receipt this Period 75.00

**C.** Full Name (Last, First, Middle Initial)  
REV DONALD DERIVAUX 391  
Mailing Address 2440 BALLGROUND RD  
City VICKSBURG State MS Zip Code 39183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation CLERGY  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 290.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: SA11AI.62449  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 37 / 177  
(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)  
REV DONALD DERIVAUX 391  
Mailing Address 2440 BALLGROUND RD  
City VICKSBURG State MS Zip Code 39183  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation CLERGY  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 340.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: SA11AI.62448  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR SIEGFRIED F DEVRIES 906  
Mailing Address 11922 BLUEFIELD AVE  
City LA MIRADA State CA Zip Code 90638  
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 ▼ 320.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.61142  
Amount of Each Receipt this Period 70.00

**C.** Full Name (Last, First, Middle Initial)  
STEPHEN J DEWITT 630  
Mailing Address 983 CLAYTONBROOK DR  
City BALLWIN State MO Zip Code 63011  
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 ▼ 308.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.59692  
Amount of Each Receipt this Period 38.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 158.00  
**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 38 / 177  
(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 THADDEUS N DEWOLF 467  
Mailing Address 206 W PARR RD

City State Zip Code  
BERNE IN 46711

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
438.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 8  
**Transaction ID:** SA11AI.59149  
Amount of Each Receipt this Period  
225.00

**B.** Full Name (Last, First, Middle Initial)  
MR THADDEUS N DEWOLF 467  
Mailing Address 206 W PARR RD

City State Zip Code  
BERNE IN 46711

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
513.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 8  
**Transaction ID:** SA11AI.59150  
Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
MISS NANCY M DICKINSON 244  
Mailing Address 2306 MAPLE AVE

City State Zip Code  
BUENA VISTA VA 24416

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 4 / 2 0 0 8  
**Transaction ID:** SA11AI.63330  
Amount of Each Receipt this Period  
50.00

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

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

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

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

FOR LINE NUMBER: PAGE 39 / 177

(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 ESMAIEL DOOSTMARD 926

Mailing Address 2118 PORT DURNESS PL

City State Zip Code  
NEWPORT BEACH CA 92660

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

Name of Employer Occupation  
SELF EMPLOYED HAIRSTYLIST

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

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

Transaction ID: SA11AI.58545

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS KATHERINE DOWNES 029

Mailing Address 106 LAURISTON ST

City State Zip Code  
PROVIDENCE RI 02906

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 223.00

Date of Receipt

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

Transaction ID: SA11AI.61718

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MISS ALTHEA DULEY 207

Mailing Address 8505 CROOM RD

City State Zip Code  
UPPER MARLBORO MD 20772

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.63122

Amount of Each Receipt this Period  
105.00

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

305.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 177

(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)  
MISS ALTHEA DULEY 207

Mailing Address 8505 CROOM RD

City State Zip Code  
UPPER MARLBORO MD 20772

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
315.00

Date of Receipt

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

Transaction ID: SA11AI.63123

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS MILDRED A DUNN 665

Mailing Address 2121 MEADOWLARK RD APT 420

City State Zip Code  
MANHATTAN KS 66502

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
535.00

Date of Receipt

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

Transaction ID: SA11AI.56903

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JOHN L EARLE 973

Mailing Address PO BOX 133

City State Zip Code  
SWEET HOME OR 97386

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

Name of Employer Occupation  
ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt

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

Transaction ID: SA11AI.58922

Amount of Each Receipt this Period

20.00

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

275.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 177  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
MR JOHN L EARLE 973

Mailing Address PO BOX 133

City State Zip Code  
**SWEET HOME OR 97386**

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

Name of Employer Occupation  
ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **295.00**

Date of Receipt  
MM / DD / YYYY  
**10 / 24 / 2008**

**Transaction ID: SA11AI.58921**

Amount of Each Receipt this Period  
**75.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR JOHN W EAST 220

Mailing Address 6525 KERNS RD

City State Zip Code  
**FALLS CHURCH VA 22044**

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  
MM / DD / YYYY  
**11 / 13 / 2008**

**Transaction ID: SA11AI.56641**

Amount of Each Receipt this Period  
**200.00**

**C.**

Full Name (Last, First, Middle Initial)  
MRS WILMA EASTMAN 212

Mailing Address 1502 RIDGE RD

City State Zip Code  
**CATONSVILLE MD 21228**

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 24 / 2008**

**Transaction ID: SA11AI.63190**

Amount of Each Receipt this Period  
**400.00**

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

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

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

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

FOR LINE NUMBER: PAGE 42 / 177

(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 PAUL EBLE 467

Mailing Address PO BOX 273

City State Zip Code  
ANGOLA IN 46703

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 ▼ 288.00

Date of Receipt

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

Transaction ID: SA11AI.62760

Amount of Each Receipt this Period  
113.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS ALICE EDWARDS 502

Mailing Address 210 EAST SHAW

City State Zip Code  
OSCEOLA IA 50213

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 ▼ 395.00

Date of Receipt

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

Transaction ID: SA11AI.62967

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
MARK S EDWARDS 900

Mailing Address

City State Zip Code  
LOS ANGELES CA 90030

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.57502

Amount of Each Receipt this Period  
150.00

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

293.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 177  
(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 TERRIL EFIRD 937  
Mailing Address 2519 W MAGILL AVE  
City FRESNO State CA Zip Code 93711  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 475.00  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.58638  
Amount of Each Receipt this Period 150.00

**B.** 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 ▼ 210.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: SA11AI.62051  
Amount of Each Receipt this Period 35.00

**C.** 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 ▼ 235.00  
Date of Receipt 11 / 17 / 2008  
Transaction ID: SA11AI.62052  
Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 210.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 44 / 177  
(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 D EVELYN ELLIS 461

Mailing Address 8401 N RUSHVILLE RD

City State Zip Code  
CARTHAGE IN 46115

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 ▼ 235.00

Date of Receipt: 10 / 20 / 2008  
Transaction ID: SA11AI.62714  
Amount of Each Receipt this Period: 25.00

**B.** Full Name (Last, First, Middle Initial)  
MRS D EVELYN ELLIS 461

Mailing Address 8401 N RUSHVILLE RD

City State Zip Code  
CARTHAGE IN 46115

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 ▼ 270.00

Date of Receipt: 11 / 17 / 2008  
Transaction ID: SA11AI.62713  
Amount of Each Receipt this Period: 35.00

**C.** Full Name (Last, First, Middle Initial)  
MR ROBERT ELROD 312

Mailing Address 300 CHARTER BLVD #212

City State Zip Code  
MACON GA 31210

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 ▼ 350.00

Date of Receipt: 11 / 04 / 2008  
Transaction ID: SA11AI.63464  
Amount of Each Receipt this Period: 200.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 177

(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 WILLIAM R ENGEL 501

Mailing Address 7059 COBURN LN

City State Zip Code  
JOHNSTON IA 50131

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) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
11 / 17 / 2008

Transaction ID: SA11AI.62965

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
MR HENRY ERHARD 044

Mailing Address PO BOX 428

City State Zip Code  
CASTINE ME 04421

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) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 27 / 2008

Transaction ID: SA11AI.61750

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
MR & MRS EDMUND EVANS 434

Mailing Address 16186 KELLOGG RD

City State Zip Code  
BOWLING GREEN OH 43402

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) ▼ 399.99

Date of Receipt

M M / D D / Y Y Y Y  
11 / 17 / 2008

Transaction ID: SA11AI.62557

Amount of Each Receipt this Period

200.00

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

600.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 177

(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 LES FELDICK 745

Mailing Address 30706 W LONA VALLEY RD

City State Zip Code  
KINTA OK 74552

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: SA11AI.60475

Amount of Each Receipt this Period

200.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
MR LARRY FERNANDES 797

Mailing Address PO BOX 800

City State Zip Code  
KERMIT TX 79745

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt

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

Transaction ID: SA11AI.61529

Amount of Each Receipt this Period

250.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
OTTO FIALA 091

Mailing Address CMR 480 BOX 672

City State Zip Code  
APO AE 09128

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

Name of Employer Occupation  
LC COMM ANALYST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: SA11AI.59202

Amount of Each Receipt this Period

30.00
-------

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

480.00
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**TOTAL** This Period (last page this line number only) ..... ►

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 177

(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 JAMES M FITZPATRICK 760

Mailing Address 2811 OAK TRAIL CT

City State Zip Code  
ARLINGTON TX 76016

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) ▼ 525.00

Date of Receipt

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

Transaction ID: SA11AI.60528

Amount of Each Receipt this Period

210.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
MR JAMES M FITZPATRICK 760

Mailing Address 2811 OAK TRAIL CT

City State Zip Code  
ARLINGTON TX 76016

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) ▼ 595.00

Date of Receipt

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

Transaction ID: SA11AI.60529

Amount of Each Receipt this Period

70.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
MS SARAH G FLEMING 853

Mailing Address 17300 N 88TH AVE

City State Zip Code  
PEORIA AZ 85382

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.56884

Amount of Each Receipt this Period

100.00
--------

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

380.00
--------

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

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

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

FOR LINE NUMBER: PAGE 48 / 177  
(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)  
MS ALMA FOWLER 485  
Mailing Address 2031 CONNELL ST

City State Zip Code  
BURTON MI 48529

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

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

**Transaction ID:** SA11AI.56714  
 Amount of Each Receipt this Period  
25.00

**B.** Full Name (Last, First, Middle Initial)  
MR WILLIAM H FOWLKES 687  
Mailing Address 53740 833 RD

City State Zip Code  
MEADOW GROVE NE 68752

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

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

**Transaction ID:** SA11AI.60319  
 Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILLIAM H FOWLKES 687  
Mailing Address 53740 833 RD

City State Zip Code  
MEADOW GROVE NE 68752

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
248.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	8

**Transaction ID:** SA11AI.60318  
 Amount of Each Receipt this Period  
38.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **98.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 177  
(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 DAVID FRYE 170  
Mailing Address 308 STONE ROW LN  
City NEW CUMBERLAND State PA Zip Code 17070  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PPL Occupation ELECTRICIAN  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 220.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.57024  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR HERSELL N GARRETT 718  
Mailing Address 7 WHITE WILLOW PL  
City TEXARKANA State AR Zip Code 71854  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: SA11AI.60118  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR MICHAEL GASICIEL 488  
Mailing Address 1985 LAKE LANSING RD APT 22  
City HASLETT State MI Zip Code 48840  
FEC ID number of contributing federal political committee. **C**  
Name of Employer GENERAL MOTORS Occupation AUTO WORKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.59248  
Amount of Each Receipt this Period 300.00

**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 50 / 177  
(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 MICHAEL GASICIEL 488

Mailing Address 1985 LAKE LANSING RD APT 22

City HASLETT State MI Zip Code 48840

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

Name of Employer GENERAL MOTORS Occupation AUTO WORKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 10 / 27 / 2008  
Transaction ID: SA11AI.59249  
Amount of Each Receipt this Period: 150.00

**B.** Full Name (Last, First, Middle Initial)  
MR TERRY GEMAS 752

Mailing Address 6732 SONDRRA DR

City DALLAS State TX Zip Code 75214

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: 10 / 29 / 2008  
Transaction ID: SA11AI.60499  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MRS GAY B GEORGE 852

Mailing Address 6041 N 51ST PL

City SCOTTSDALE State AZ Zip Code 85253

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 10 / 20 / 2008  
Transaction ID: SA11AI.60836  
Amount of Each Receipt this Period: 100.00

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

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

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

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

FOR LINE NUMBER: PAGE 51 / 177  
(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)  
MISS JANET W GILDERMASTER 704  
Mailing Address 135 COLVER DR

City State Zip Code  
PONCHATOULA LA 70454

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 03 / 2008  
Transaction ID: SA11AI.60353  
Amount of Each Receipt this Period: 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR DELBERT GLASER 973  
Mailing Address 31997 SAND RIDGE RD

City State Zip Code  
LEBANON OR 97355

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt: 11 / 03 / 2008  
Transaction ID: SA11AI.58912  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR THOMAS A GLEESON 323  
Mailing Address 2106 OLD BAINBRIDGE RD

City State Zip Code  
TALLAHASSEE FL 32303

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: 10 / 31 / 2008  
Transaction ID: SA11AI.63510  
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 52 / 177  
(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 PHILIP GOLDRICH 100

Mailing Address 19 STUYVESANT ST

City State Zip Code  
NEW YORK NY 10003

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) ▼ 257.00

Date of Receipt

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

Transaction ID: SA11AI.61970

Amount of Each Receipt this Period

99.00

**B.**

Full Name (Last, First, Middle Initial)  
MR PHILIP GOLDRICH 100

Mailing Address 19 STUYVESANT ST

City State Zip Code  
NEW YORK NY 10003

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) ▼ 365.00

Date of Receipt

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

Transaction ID: SA11AI.61969

Amount of Each Receipt this Period

108.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS K JOSEPHINE GOODRIDGE 591

Mailing Address 2049 INTERLACHEN DR

City State Zip Code  
BILLINGS MT 59105

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.60970

Amount of Each Receipt this Period

50.00

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

257.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 177  
(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 CHARLES F GORDER 921

Mailing Address 5526 TOYON RD

City State Zip Code  
**SAN DIEGO CA 92115**

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

Name of Employer Occupation  
ALHADEFF & SOLAR L.L.P. ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **11 / 18 / 2008**

**Transaction ID: SA11AI.58440**

Amount of Each Receipt this Period **100.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR JOHN W GORE 210, JR

Mailing Address 2525 POT SPRING RD UNIT S520

City State Zip Code  
**LUTHERVILLE TIMONI MD 21093**

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 27 / 2008**

**Transaction ID: SA11AI.60031**

Amount of Each Receipt this Period **50.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR ROBERT L GOVE 532

Mailing Address 3109 N MENOMONEE RIVER PKWY

City State Zip Code  
**MILWAUKEE WI 53222**

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

Name of Employer Occupation  
NELSON ELECTRIC SUPPLY SALES ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **10 / 30 / 2008**

**Transaction ID: SA11AI.63043**

Amount of Each Receipt this Period **50.00**

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 177  
(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)  
MRS MARILYN G GRAY 284

Mailing Address 1808 MEWS DR

City State Zip Code  
WILMINGTON NC 28405

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

Transaction ID: SA11AI.63882

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS MARILYN G GRAY 284

Mailing Address 1808 MEWS DR

City State Zip Code  
WILMINGTON NC 28405

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: SA11AI.63881

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
MISS JOANN L GREB 548

Mailing Address 8861 W WILSON BAY DR

City State Zip Code  
HAYWARD WI 54843

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 ▼ 2000.00

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

Transaction ID: SA11AI.60186

Amount of Each Receipt this Period  
750.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1050.00**

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

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

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

FOR LINE NUMBER: PAGE 55 / 177  
(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 IVO P GREIF 617

Mailing Address 306 AUGUSTINE WAY

City State Zip Code  
NORMAL IL 61761

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: 10 / 31 / 2008  
Transaction ID: SA11AI.61242  
Amount of Each Receipt this Period: 20.00

**B.** Full Name (Last, First, Middle Initial)  
MR J GRIFFIN 190

Mailing Address 77 MIDDLE RD APT 360

City State Zip Code  
BRYN MAWR PA 19010

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 ▼ 900.00

Date of Receipt: 10 / 17 / 2008  
Transaction ID: SA11AI.63787  
Amount of Each Receipt this Period: 600.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILLIAM P GRIGSBY 376

Mailing Address 5712 CHESTNUT HILLS DR

City State Zip Code  
KINGSPORT TN 37664

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 10 / 22 / 2008  
Transaction ID: SA11AI.62397  
Amount of Each Receipt this Period: 60.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 680.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 177

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)  
MR WILLIAM P GRIGSBY 376

Mailing Address 5712 CHESTNUT HILLS DR

City State Zip Code  
KINGSPORT TN 37664

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt

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

Transaction ID: SA11AI.62398

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
MISS LUCY W GROH 995

Mailing Address PO BOX 203113

City State Zip Code  
ANCHORAGE AK 99520

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt

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

Transaction ID: SA11AI.59089

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)  
MISS LUCY W GROH 995

Mailing Address PO BOX 203113

City State Zip Code  
ANCHORAGE AK 99520

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt

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

Transaction ID: SA11AI.59091

Amount of Each Receipt this Period

25.00

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

110.00

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

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

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

FOR LINE NUMBER: PAGE 57 / 177  
(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 W GROW 194  
Mailing Address 248 MINERAL ST  
City POTTSTOWN State PA Zip Code 19464  
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 ▼ 350.00  
Date of Receipt 11 / 12 / 2008  
Transaction ID: SA11AI.63849  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
PAUL L GRUBBS 327  
Mailing Address 2907 AMBERGATE RD  
City WINTER PARK State FL Zip Code 32792  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation NOT EMPLOYED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 11 / 21 / 2008  
Transaction ID: SA11AI.56839  
Amount of Each Receipt this Period 25.00

**C.** Full Name (Last, First, Middle Initial)  
MR WALTER A GUINTEH 142  
Mailing Address 357 SAINT LAWRENCE AVE  
City BUFFALO State NY Zip Code 14216  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.58295  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 325.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 177  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
MR WALTER A GUNTHER 142

Mailing Address 357 SAINT LAWRENCE AVE

City State Zip Code  
**BUFFALO NY 14216**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**335.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**11 / 18 / 2008**

**Transaction ID: SA11AI.58296**

Amount of Each Receipt this Period  
**50.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR JOHN R HADEN 230

Mailing Address 5347 OLD COLUMBIA RD

City State Zip Code  
**GOOCHLAND VA 23063**

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 ▼  
**230.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 20 / 2008**

**Transaction ID: SA11AI.63273**

Amount of Each Receipt this Period  
**20.00**

**C.**

Full Name (Last, First, Middle Initial)  
MS LORNA HANSEN 691

Mailing Address 1521 E 10TH ST

City State Zip Code  
**NORTH PLATTE NE 69101**

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

Name of Employer Occupation  
HANSEN RANCH CO CATTLE RANCHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**11 / 07 / 2008**

**Transaction ID: SA11AI.60326**

Amount of Each Receipt this Period  
**200.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **270.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 177

(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 BRUCE R HARTE 488

Mailing Address 14060 WATSON RD

City State Zip Code  
BATH MI 48808

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt

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

Transaction ID: SA11AI.56727

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
MR W H HAUER 074, JR

Mailing Address 122 TIMBER RDG

City State Zip Code  
POMPTON PLAINS NJ 07444

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt

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

Transaction ID: SA11AI.56496

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS RONALD HAUSMAN 770

Mailing Address 12331 BEAUREGARD DR

City State Zip Code  
HOUSTON TX 77024

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt

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

Transaction ID: SA11AI.60593

Amount of Each Receipt this Period

50.00

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

400.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 177  
(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 RICHARD HAUSRATH 481  
Mailing Address 8280 BEACON LN  
City NORTHVILLE State MI Zip Code 48168  
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 11 / 18 / 2008  
Transaction ID: SA11AI.62844  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES HEATHER 952  
Mailing Address 10095 CREEK TRAIL CIR  
City STOCKTON State CA Zip Code 95209  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF EMPLOYED Occupation CPA  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.58758  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
MRS ELLA M HELM 300  
Mailing Address 3385 HALLMARK DR SE  
City MARIETTA State GA Zip Code 30067  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 10 / 17 / 2008  
Transaction ID: SA11AI.63632  
Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 425.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 61 / 177  
(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 ELLA M HELM 300  
Mailing Address 3385 HALLMARK DR SE  
City MARIETTA State GA Zip Code 30067  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 11 / 17 / 2008  
Transaction ID: SA11AI.63631  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR L E HENDERSON 950  
Mailing Address 2974 RIDGE CT  
City SANTA CLARA State CA Zip Code 95051  
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 10 / 31 / 2008  
Transaction ID: SA11AI.58747  
Amount of Each Receipt this Period 25.00

**C.** Full Name (Last, First, Middle Initial)  
MS MARIE D HESS 117  
Mailing Address 74 HUMPHREY DR  
City SYOSSET State NY Zip Code 11791  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 235.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: SA11AI.59285  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 175.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 62 / 177  
(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)  
MS MARIE D HESS 117

Mailing Address 74 HUMPHREY DR

City State Zip Code  
SYOSSET NY 11791

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
285.00

Date of Receipt

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

Transaction ID: SA11AI.59286

Amount of Each Receipt this Period

50.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
MISS MILDRED HOLLIS 479

Mailing Address 1208 S BRADY ST

City State Zip Code  
ATTICA IN 47918

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 ▼  
275.00

Date of Receipt

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

Transaction ID: SA11AI.62810

Amount of Each Receipt this Period

100.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
MR GEORGE D HOLMES 757

Mailing Address 130 MARINA DR

City State Zip Code  
BULLARD TX 75757

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
316.00

Date of Receipt

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

Transaction ID: SA11AI.60519

Amount of Each Receipt this Period

53.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ▶

203.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 63 / 177  
(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 GEORGE D HOLMES 757  
Mailing Address 130 MARINA DR  
City BULLARD State TX Zip Code 75757  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 386.00  
Date of Receipt 11 / 20 / 2008  
Transaction ID: SA11AI.60520  
Amount of Each Receipt this Period 70.00

**B.** Full Name (Last, First, Middle Initial)  
MR DENNIS HORTON 927  
Mailing Address 17601 17TH ST STE 250  
City TUSTIN State CA Zip Code 92780  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 11 / 19 / 2008  
Transaction ID: SA11AI.58568  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
MRS AL HUGHES 706  
Mailing Address 1608 22ND ST  
City LAKE CHARLES State LA Zip Code 70601  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.60360  
Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 210.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 177

(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)

MRS AL HUGHES 706

Mailing Address 1608 22ND ST

City State Zip Code  
LAKE CHARLES LA 70601

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt

MM / DD / YYYY  
10 / 24 / 2008

Transaction ID: SA11AI.60361

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

MR GEORGE D HYPES 210

Mailing Address 444 W BEL AIR AVE

City State Zip Code  
ABERDEEN MD 21001

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt

MM / DD / YYYY  
10 / 29 / 2008

Transaction ID: SA11AI.63139

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MR RONALD W JACKSON 435

Mailing Address 5679 MONROE ST APT 1117

City State Zip Code  
SYLVANIA OH 43560

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt

MM / DD / YYYY  
10 / 17 / 2008

Transaction ID: SA11AI.62564

Amount of Each Receipt this Period

105.00

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

480.00

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

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

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

FOR LINE NUMBER: PAGE 65 / 177  
(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 W JACKSON 435  
Mailing Address 5679 MONROE ST APT 1117

City State Zip Code  
SYLVANIA OH 43560

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 ▼ 263.00

Date of Receipt: 10 / 23 / 2008  
Transaction ID: SA11AI.62563  
Amount of Each Receipt this Period: 53.00

**B.** Full Name (Last, First, Middle Initial)  
MR RONALD W JACKSON 435  
Mailing Address 5679 MONROE ST APT 1117

City State Zip Code  
SYLVANIA OH 43560

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 ▼ 289.00

Date of Receipt: 10 / 30 / 2008  
Transaction ID: SA11AI.62565  
Amount of Each Receipt this Period: 26.00

**C.** Full Name (Last, First, Middle Initial)  
MARY JACOBONI 838  
Mailing Address 10634 N BLUEROCK LN

City State Zip Code  
HAYDEN LAKE ID 83835

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: 11 / 07 / 2008  
Transaction ID: SA11AI.58135  
Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 329.00

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

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

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

FOR LINE NUMBER: PAGE 66 / 177  
(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)  
MITCHELL JAFFEE 191  
Mailing Address 1833 STANWOOD ST  
City PHILADELPHIA State PA Zip Code 19152  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: SA11AI.56458  
Amount of Each Receipt this Period 300.00

**B.** Full Name (Last, First, Middle Initial)  
MR PHIL F JENKINS 481  
Mailing Address 2041 GREENVIEW DR  
City ANN ARBOR State MI Zip Code 48103  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: SA11AI.62826  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
MRS MARIE-LUISE KALSI 770  
Mailing Address 13307 CAROUSEL CT  
City HOUSTON State TX Zip Code 77041  
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 ▼ 550.00  
Date of Receipt 11 / 10 / 2008  
Transaction ID: SA11AI.60599  
Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 950.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 67 / 177  
(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 GERALDINE C KEEGAN 532  
Mailing Address 1904 W SALEM ST  
City MILWAUKEE State WI Zip Code 53221  
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 10 / 22 / 2008  
Transaction ID: SA11AI.63042  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
MISS ANN M KELLER 295  
Mailing Address 328 13TH AVE S  
City SURFSIDE BEACH State SC Zip Code 29575  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation WIDOW  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 11 / 12 / 2008  
Transaction ID: SA11AI.63577  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR DONALD KELLEY 992  
Mailing Address 221 E ROCKWOOD BLVD APT 320  
City SPOKANE State WA Zip Code 99202  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00  
Date of Receipt 11 / 17 / 2008  
Transaction ID: SA11AI.59067  
Amount of Each Receipt this Period 105.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 230.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 177

(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)  
MS ALICE G KERR 970

Mailing Address 1716 KINGSLEY ST

City State Zip Code  
THE DALLES OR 97058

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
263.00

Date of Receipt

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

Transaction ID: SA11AI.58865

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)  
MS ALICE G KERR 970

Mailing Address 1716 KINGSLEY ST

City State Zip Code  
THE DALLES OR 97058

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
333.00

Date of Receipt

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

Transaction ID: SA11AI.58866

Amount of Each Receipt this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ALBERT B KITCHEN 309, JR

Mailing Address 1035 RIVER RIDGE DR

City State Zip Code  
AUGUSTA GA 30909

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 ▼  
220.00

Date of Receipt

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

Transaction ID: SA11AI.63460

Amount of Each Receipt this Period

35.00

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

210.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 177
	<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 ALBERT B KITCHEN 309, JR		Date of Receipt	
	Mailing Address 1035 RIVER RIDGE DR		M M / D D / Y Y Y Y Y 1 1 / 1 8 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.63459
	AUGUSTA	GA	30909	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer NONE		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) MR KENNETH W KLINE 780		Date of Receipt	
	Mailing Address 677 US MARSHALL RD		M M / D D / Y Y Y Y Y 1 1 / 1 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.60685
	MEDINA	TX	78055	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer NONE		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) MS FLORENCE KLINZMAN 807		Date of Receipt	
	Mailing Address 7170 COUNTY ROAD 53		M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.61586
	YUMA	CO	80759	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
Name of Employer JOHN KLINZMAN		Occupation SELF EMPLOYED		
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) .....	▶	150.00
<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 70 / 177

(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 KOSLOFF 441

Mailing Address 11800 EDGEWATER DR #815

City State Zip Code  
LAKEWOOD OH 44107

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

Name of Employer Occupation  
ENGINEER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

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

Transaction ID: SA11AI.62611

Amount of Each Receipt this Period  
75.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS SUZANNE THOMPSON KUTA 232

Mailing Address 9003 NORWICK RD

City State Zip Code  
RICHMOND VA 23229

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 ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.59216

Amount of Each Receipt this Period  
75.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JOE KWIATKOWSKI 148

Mailing Address 3330 HALSEYVILLE RD  
3330 HALSEYVILLE RD

City State Zip Code  
TRUMANSBURG NY 14886

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.58335

Amount of Each Receipt this Period  
150.00

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 71 / 177

(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)  
DR JAMES LABACH 662, MD

Mailing Address 10002 W 121ST ST

City State Zip Code  
SHAWNEE MISSION KS 66213

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

Name of Employer Occupation  
PHYSICIANS REFERENCE LAB PATHOLOGIST

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.61412

Amount of Each Receipt this Period

50.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
MS JANE LAIRD 198

Mailing Address 4031 KENNETT PIKE

City State Zip Code  
GREENVILLE DE 19807

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

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

Transaction ID: SA11AI.59135

Amount of Each Receipt this Period

150.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
MR LESLIE LAMB 141

Mailing Address 3538 DRAKE STREET RD

City State Zip Code  
OAKFIELD NY 14125

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.58292

Amount of Each Receipt this Period

100.00
--------

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

300.00
--------

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

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

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

FOR LINE NUMBER: PAGE 72 / 177  
(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)  
MS ETHEL M LANGFORD 815  
Mailing Address 1725 10 RD

City State Zip Code  
MACK CO 81525

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 12 / 2008

**Transaction ID:** SA11AI.61629

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
MS ETHEL M LANGFORD 815  
Mailing Address 1725 10 RD

City State Zip Code  
MACK CO 81525

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 19 / 2008

**Transaction ID:** SA11AI.61630

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR LOUIS G LA POINTE 010, JR  
Mailing Address 226 PARKER ST

City State Zip Code  
E LONGMEADOW MA 01028

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 31 / 2008

**Transaction ID:** SA11AI.57075

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 73 / 177  
(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)  
REV JOSEPH LASKY 187

Mailing Address 260 S MEADE ST # 222

City State Zip Code  
**WILKES BARRE PA 18702**

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 ▼ **245.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**11 / 18 / 2008**

**Transaction ID: SA11AI.57478**

Amount of Each Receipt this Period  
**105.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR VICTOR A LAZAR 148

Mailing Address 108 WOOLF LN

City State Zip Code  
**ITHACA NY 14850**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**11 / 20 / 2008**

**Transaction ID: SA11AI.58330**

Amount of Each Receipt this Period  
**200.00**

**C.**

Full Name (Last, First, Middle Initial)  
MRS INGEBORG R LEDERGERBER 331

Mailing Address 14248 SW 47TH ST

City State Zip Code  
**MIAMI FL 33175**

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 ▼ **253.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 21 / 2008**

**Transaction ID: SA11AI.62141**

Amount of Each Receipt this Period  
**25.00**

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

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

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

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

FOR LINE NUMBER: PAGE 74 / 177  
(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 INGEBORG R LEDERGERBER 331  
Mailing Address 14248 SW 47TH ST

City State Zip Code  
MIAMI FL 33175

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 ▼ 303.00

Date of Receipt: 10 / 23 / 2008  
Transaction ID: SA11AI.62142  
Amount of Each Receipt this Period: 50.00

**B.** Full Name (Last, First, Middle Initial)  
MRS INGEBORG R LEDERGERBER 331  
Mailing Address 14248 SW 47TH ST

City State Zip Code  
MIAMI FL 33175

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 ▼ 313.00

Date of Receipt: 11 / 17 / 2008  
Transaction ID: SA11AI.62143  
Amount of Each Receipt this Period: 10.00

**C.** Full Name (Last, First, Middle Initial)  
MR HENRY LEONARDI 949  
Mailing Address 432 CALLE DE LA MESA

City State Zip Code  
NOVATO CA 94949

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 11 / 03 / 2008  
Transaction ID: SA11AI.58730  
Amount of Each Receipt this Period: 30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.00

**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 75 / 177

(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 HENRY LEONARDI 949

Mailing Address 432 CALLE DE LA MESA

City State Zip Code  
NOVATO CA 94949

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt

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

Transaction ID: SA11AI.58732

Amount of Each Receipt this Period

30.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
MISS MARY J LEWIS 374

Mailing Address 1414 CONTINENTAL DR APT 1205

City State Zip Code  
CHATTANOOGA TN 37405

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 ▼  
1200.00

Date of Receipt

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

Transaction ID: SA11AI.62389

Amount of Each Receipt this Period

100.00
--------

**C.**

Full Name (Last, First, Middle Initial)  
MR PAUL F LIENEMANN 681

Mailing Address 3024 S 101ST ST

City State Zip Code  
OMAHA NE 68124

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

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

Transaction ID: SA11AI.59110

Amount of Each Receipt this Period

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

230.00
--------

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

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

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

FOR LINE NUMBER: PAGE 76 / 177  
(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 PAUL F LIENEMANN 681  
Mailing Address 3024 S 101ST ST  
City OMAHA State NE Zip Code 68124  
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 10 / 31 / 2008  
Transaction ID: SA11AI.59109  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR JOE G LIPPARD 238  
Mailing Address 3102 COX RD  
City WILSONS State VA Zip Code 23894  
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 ▼ 226.00  
Date of Receipt 11 / 20 / 2008  
Transaction ID: SA11AI.60537  
Amount of Each Receipt this Period 35.00

**C.** Full Name (Last, First, Middle Initial)  
MRS MARY LOCKWOOD 852  
Mailing Address 26414 S TRURO DR  
City SUN LAKES State AZ Zip Code 85248  
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 10 / 31 / 2008  
Transaction ID: SA11AI.60826  
Amount of Each Receipt this Period 75.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 210.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 177

(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 BERNARD LOUIS 535

Mailing Address 30511 COUNTY HWY B

City	State	Zip Code
LONE ROCK	WI	53556

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 ▼ 265.00
---	------------------------------------

Date of Receipt

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

Transaction ID: SA11AI.63056

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)  
MR CURTIS LUMSDEN 540

Mailing Address 19691 140TH AVE

City	State	Zip Code
SAINT CROIX FALLS	WI	54024

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

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
---	------------------------------------

Date of Receipt

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

Transaction ID: SA11AI.63071

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR CURTIS LUMSDEN 540

Mailing Address 19691 140TH AVE

City	State	Zip Code
SAINT CROIX FALLS	WI	54024

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

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

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00
---	------------------------------------

Date of Receipt

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

Transaction ID: SA11AI.63072

Amount of Each Receipt this Period

100.00

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

215.00

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

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

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

FOR LINE NUMBER: PAGE 78 / 177  
(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 WILBURN L LUNA 840  
Mailing Address 1720 S 3135 W

City State Zip Code  
VERNAL UT 84078

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1220.00

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

**Transaction ID:** SA11AI.60781

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
MR WILBURN L LUNA 840  
Mailing Address 1720 S 3135 W

City State Zip Code  
VERNAL UT 84078

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1320.00

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

**Transaction ID:** SA11AI.60777

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILBURN L LUNA 840  
Mailing Address 1720 S 3135 W

City State Zip Code  
VERNAL UT 84078

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1470.00

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

**Transaction ID:** SA11AI.60778

Amount of Each Receipt this Period  
150.00

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

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

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

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

FOR LINE NUMBER: PAGE 79 / 177  
(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 WILBURN L LUNA 840  
Mailing Address 1720 S 3135 W

City State Zip Code  
VERNAL UT 84078

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2470.00

Date of Receipt: 10 / 31 / 2008  
Transaction ID: SA11AI.60780  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
MR WILBURN L LUNA 840  
Mailing Address 1720 S 3135 W

City State Zip Code  
VERNAL UT 84078

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2845.00

Date of Receipt: 11 / 07 / 2008  
Transaction ID: SA11AI.60779  
Amount of Each Receipt this Period: 375.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILLIAM L LUNSFORD 338  
Mailing Address PO BOX 248

City State Zip Code  
ONA FL 33865

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 11 / 03 / 2008  
Transaction ID: SA11AI.62223  
Amount of Each Receipt this Period: 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1575.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 177

(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 FREDERICK MACKINTOSH 895

Mailing Address 7350 LAKESIDE DR

City State Zip Code  
RENO NV 89511

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

Name of Employer Occupation  
SELF EMPLOYED CONSULTANT

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

Date of Receipt

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

Transaction ID: SA11AI.56438

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
MISS SUSAN MARCOTTE 968

Mailing Address 1333 HEULU ST APT 1107

City State Zip Code  
HONOLULU HI 96822

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

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

Transaction ID: SA11AI.58856

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JAMES MARET 296

Mailing Address 2410 HIGHWAY 243

City State Zip Code  
TOWNVILLE SC 29689

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.63601

Amount of Each Receipt this Period

150.00

**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 81 / 177  
(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 CHARLES MATTHEWS 600  
Mailing Address 321 GRAND AVE  
City WAUKEGAN State IL Zip Code 60085  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MATTHEWS EMPLOYMENT INC Occupation BUSINESS OWNER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 17 / 2008  
Transaction ID: SA11AI.56962  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
MRS FLORENCE MCCAFFREY 410  
Mailing Address 2220 N FORT THOMAS AVE  
City FORT THOMAS State KY Zip Code 41075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.57311  
Amount of Each Receipt this Period 40.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOHN C MCCRILLIS 037  
Mailing Address PO BOX 458  
City NEWPORT State NH Zip Code 03773  
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 ▼ 335.00  
Date of Receipt 11 / 17 / 2008  
Transaction ID: SA11AI.59240  
Amount of Each Receipt this Period 70.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 610.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 82 / 177  
(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 CORNELIA D MCCURDY 190  
Mailing Address 801 YALE AVE  
City SWARTHMORE State PA Zip Code 19081  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation HOMEMAKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 325.00  
Date of Receipt 11 / 17 / 2008  
Transaction ID: SA11AI.60016  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
TERRY MCKEE 773  
Mailing Address 18109 DRUM HELLER LN  
City TOMBALL State TX Zip Code 77377  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.58016  
Amount of Each Receipt this Period 300.00

**C.** Full Name (Last, First, Middle Initial)  
MR CHESTER A MCKENZIE 423  
Mailing Address 6260 STATE ROUTE 256  
City CALHOUN State KY Zip Code 42327  
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 ▼ 375.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.62521  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 450.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 177  
(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 COMPTON MCKENZIE 972

Mailing Address 4007 NE SKIDMORE ST

City State Zip Code  
PORTLAND OR 97211

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

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

Transaction ID: SA11AI.58890

Amount of Each Receipt this Period  
45.00

**B.**

Full Name (Last, First, Middle Initial)  
MR COMPTON MCKENZIE 972

Mailing Address 4007 NE SKIDMORE ST

City State Zip Code  
PORTLAND OR 97211

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 ▼ 330.00

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

Transaction ID: SA11AI.58891

Amount of Each Receipt this Period  
45.00

**C.**

Full Name (Last, First, Middle Initial)  
MR COMPTON MCKENZIE 972

Mailing Address 4007 NE SKIDMORE ST

City State Zip Code  
PORTLAND OR 97211

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 ▼ 385.00

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

Transaction ID: SA11AI.58889

Amount of Each Receipt this Period  
55.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **145.00**

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

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

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

FOR LINE NUMBER: PAGE 84 / 177  
(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 PHIL MCKINNON 282

Mailing Address 6224 DEVERON DR

City State Zip Code  
CHARLOTTE NC 28211

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** SA11AI.59122

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
MR PHIL MCKINNON 282

Mailing Address 6224 DEVERON DR

City State Zip Code  
CHARLOTTE NC 28211

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 ▼ 750.00

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

**Transaction ID:** SA11AI.59123

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
MS MARY M MCVAY 553

Mailing Address 2201 ISENGARD ST

City State Zip Code  
MINNETONKA MN 55305

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

**Transaction ID:** SA11AI.56415

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 700.00

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

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

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

FOR LINE NUMBER: PAGE 85 / 177  
(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)  
L MEEKER 761

Mailing Address 4900 WESTRIDGE AVE

City State Zip Code  
FORT WORTH TX 76116

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  
1 0 / 2 2 / 2 0 0 8

**Transaction ID:** SA11AI.56910

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
REV JOSEPH MENDES 300

Mailing Address 85 GLOSTER RD NW

City State Zip Code  
LAWRENCEVILLE GA 30044

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

Name of Employer Occupation  
CLERGY

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

**Transaction ID:** SA11AI.61785

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
REV JOSEPH MENDES 300

Mailing Address 85 GLOSTER RD NW

City State Zip Code  
LAWRENCEVILLE GA 30044

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

Name of Employer Occupation  
CLERGY

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

**Transaction ID:** SA11AI.61787

Amount of Each Receipt this Period  
50.00

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

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

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

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

FOR LINE NUMBER: PAGE 86 / 177

(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)  
MRS TERRI MERSEREAU 971

Mailing Address PO BOX 2727  
961 LITLE BEACH DR

City State Zip Code  
GEARHART OR 97138

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 ▼  
350.00

Date of Receipt

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

Transaction ID: SA11AI.58885

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR DONALD MESSA 054

Mailing Address 10 KELLOGG RD STE 365

City State Zip Code  
ESSEX JUNCTION VT 05452

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

Name of Employer Occupation

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
255.00

Date of Receipt

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

Transaction ID: SA11AI.57371

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)  
MR DONALD T METCALFE 766

Mailing Address 106 PRIVATE ROAD 4261

City State Zip Code  
CLIFTON TX 76634

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

Name of Employer Occupation  
SELF EMPLOYED CONSULTANT

Receipt For:  Primary  General  
 Other (specify) ▼ Aggregate Year-to-Date ▼  
400.00

Date of Receipt

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

Transaction ID: SA11AI.59510

Amount of Each Receipt this Period

75.00

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

235.00

**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 87 / 177  
(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 JOHN METTIE 989

Mailing Address 5901 BARGE ST

City State Zip Code  
YAKIMA WA 98908

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: SA11AI.59394

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS CECILE A MEUNIER 010

Mailing Address 462 MAIN ST # 212

City State Zip Code  
AGAWAM MA 01001

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  
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.59477

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR DALE MICHAEL 460

Mailing Address 351 S BROADWAY ST

City State Zip Code  
PENDLETON IN 46064

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  
M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.62708

Amount of Each Receipt this Period  
50.00

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

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

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

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

FOR LINE NUMBER: PAGE 88 / 177  
(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)  
MISS MARGARET F MILLER 460  
Mailing Address 13553 KENSINGTON PL  
City CARMEL State IN Zip Code 46032  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation HOMEMAKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 223.00  
Date of Receipt 11 / 17 / 2008  
Transaction ID: SA11AI.62700  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
MR CHARLES P MINNING 910  
Mailing Address 2029 FAIR OAKS AVE  
City SOUTH PASADENA State CA Zip Code 91030  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation ENGINEERING TECH  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.57624  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
MS MARJORIE MONAGHAN 481  
Mailing Address 5140 TURTLE POINTE DR  
City ANN ARBOR State MI Zip Code 48105  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SILVER BELLS Occupation RESTAURANT OWNER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00  
Date of Receipt 10 / 17 / 2008  
Transaction ID: SA11AI.59313  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 675.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 177  
(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)  
MS MARY K MONTGOMERY 379

Mailing Address 7433 SOMERSET RD

City State Zip Code  
KNOXVILLE TN 37909

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 ▼ 463.00

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

**Transaction ID:** SA11AI.59562

Amount of Each Receipt this Period  
175.00

**B.**

Full Name (Last, First, Middle Initial)  
MS MARY K MONTGOMERY 379

Mailing Address 7433 SOMERSET RD

City State Zip Code  
KNOXVILLE TN 37909

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 ▼ 533.00

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

**Transaction ID:** SA11AI.59561

Amount of Each Receipt this Period  
70.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS HELEN MORAN 019

Mailing Address 27 CHARTER ST APT 604

City State Zip Code  
SALEM MA 01970

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

**Transaction ID:** SA11AI.57010

Amount of Each Receipt this Period  
300.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 177  
(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 MORROW 871

Mailing Address 325 LISBON AVE SE

City RIO RANCHO State NM Zip Code 87124

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 11 / 17 / 2008  
Transaction ID: SA11AI.57642  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MISS JEANNE MOULAISON 218

Mailing Address 108 WATERTOWN RD

City BERLIN State MD Zip Code 21811

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

Name of Employer NONE Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 11 / 18 / 2008  
Transaction ID: SA11AI.63208  
Amount of Each Receipt this Period 75.00

**C.** Full Name (Last, First, Middle Initial)  
MR HENRY A MULLER 328

Mailing Address 5742 PARKVIEW LAKE DR

City ORLANDO State FL Zip Code 32821

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 ▼ 520.00

Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.62102  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 225.00

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

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

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

FOR LINE NUMBER: PAGE 91 / 177  
(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 HENRY A MULLER 328  
Mailing Address 5742 PARKVIEW LAKE DR  
City ORLANDO State FL Zip Code 32821  
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 ▼ 570.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: SA11AI.62101  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR JOSEPH MYERS 321  
Mailing Address 157 MALLARD LN  
City DAYTONA BEACH State FL Zip Code 32119  
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 ▼ 213.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: SA11AI.63486  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
MR WILLIAMS MYHRE 973  
Mailing Address 865 2ND AVE  
City SWEET HOME State OR Zip Code 97386  
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 11 / 04 / 2008  
Transaction ID: SA11AI.58918  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 177  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.**

Full Name (Last, First, Middle Initial)  
MR WILLIAMS MYHRE 973

Mailing Address 865 2ND AVE

City State Zip Code  
SWEET HOME OR 97386

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 ▼ 350.00

Date of Receipt  

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

Transaction ID: SA11AI.58919

Amount of Each Receipt this Period 100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR AL M NASH 982

Mailing Address 214 MYERS RD

City State Zip Code  
FRIDAY HARBOR WA 98250

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 ▼ 255.00

Date of Receipt  

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

Transaction ID: SA11AI.58995

Amount of Each Receipt this Period 90.00

**C.**

Full Name (Last, First, Middle Initial)  
MR AL M NASH 982

Mailing Address 214 MYERS RD

City State Zip Code  
FRIDAY HARBOR WA 98250

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 ▼ 315.00

Date of Receipt  

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

Transaction ID: SA11AI.58996

Amount of Each Receipt this Period 60.00

**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 93 / 177  
(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)  
MS IRENE NEALE 970

Mailing Address 8325 SW MOHAWK ST APT 119

City State Zip Code  
TUALATIN OR 97062

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

Name of Employer Occupation  
SELF EMPLOYED REGISTERED NURSE

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt

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

Transaction ID: SA11AI.59605

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR HENRY P NEMENZ 445, SR

Mailing Address 8518 TWIN OAKS CT

City State Zip Code  
POLAND OH 44514

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

Name of Employer Occupation  
RETAIL FOOD

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

Date of Receipt

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

Transaction ID: SA11AI.59725

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
MR HENRY P NEMENZ 445, SR

Mailing Address 8518 TWIN OAKS CT

City State Zip Code  
POLAND OH 44514

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

Name of Employer Occupation  
RETAIL FOOD

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 325.00

Date of Receipt

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

Transaction ID: SA11AI.59724

Amount of Each Receipt this Period

75.00

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

225.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 177  
(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 HENRY P NEMENZ 445, SR

Mailing Address 8518 TWIN OAKS CT

City POLAND State OH Zip Code 44514

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

Name of Employer Occupation RETAIL FOOD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 12 / 2008

Transaction ID: SA11AI.59726

Amount of Each Receipt this Period 75.00

**B.**

Full Name (Last, First, Middle Initial)  
MR DONALD NESETH 600

Mailing Address 1065 E VICTORY DR #132

City LINDENHURST State IL Zip Code 60046

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 10 / 24 / 2008

Transaction ID: SA11AI.61008

Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR DONALD NESETH 600

Mailing Address 1065 E VICTORY DR #132

City LINDENHURST State IL Zip Code 60046

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2008

Transaction ID: SA11AI.61010

Amount of Each Receipt this Period 100.00

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

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

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

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

FOR LINE NUMBER: PAGE 95 / 177  
(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 DONALD NESETH 600  
Mailing Address 1065 E VICTORY DR #132  
City LINDENHURST State IL Zip Code 60046  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00  
Date of Receipt 11 / 04 / 2008  
Transaction ID: SA11AI.61007  
Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
MR DONALD NESETH 600  
Mailing Address 1065 E VICTORY DR #132  
City LINDENHURST State IL Zip Code 60046  
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 ▼ 750.00  
Date of Receipt 11 / 20 / 2008  
Transaction ID: SA11AI.61009  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOEL W NEWBY 770, JR  
Mailing Address 7802 WICKERSHAM LN  
City HOUSTON State TX Zip Code 77063  
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 11 / 04 / 2008  
Transaction ID: SA11AI.60611  
Amount of Each Receipt this Period 250.00

**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 96 / 177  
(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)  
MS KATHRYN P NOBLE 432

Mailing Address 2809 LYMINGTON RD

City State Zip Code  
COLUMBUS OH 43220

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

Name of Employer Occupation  
RETIRED ANESTHESIOLOGIST

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1450.00

Date of Receipt  

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

**Transaction ID:** SA11AI.60022

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
MR LOUIS O'BRIEN 618

Mailing Address 1 LINCOLNSHIRE AVE

City State Zip Code  
DANVILLE IL 61832

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

Name of Employer Occupation  
Occupation

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

Date of Receipt  

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

**Transaction ID:** SA11AI.56665

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
ROLAND OBERLIN 774

Mailing Address 5404 HOLLY ST

City State Zip Code  
BELLAIRE TX 77401

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

Name of Employer Occupation  
SOCIETE GENERALE PETROLEUM ENGINEER

Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00

Date of Receipt  

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

**Transaction ID:** SA11AI.56371

Amount of Each Receipt this Period  
200.00

**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 97 / 177
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

<b>A.</b>	Full Name (Last, First, Middle Initial) MR RAY P ODEN 711, JR		Date of Receipt
	Mailing Address 702 THORA BLVD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 12 / 2008
	City	State	Zip Code
	SHREVEPORT	LA	71106
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.60377
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"/> 2000.00
		<input type="text"/> 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MARICKA OKITA 980		Date of Receipt
	Mailing Address 16506 60TH AVE W		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 11 / 10 / 2008
	City	State	Zip Code
	LYNNWOOD	WA	98037
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.60145
Name of Employer HMO		Occupation MEDICAL ACCOUNTS REP	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"/> 50.00
		<input type="text"/> 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) REV EDMUND W OLIFIERS 209, JR		Date of Receipt
	Mailing Address 2129 BUCKNELL TER		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 27 / 2008
	City	State	Zip Code
	SILVER SPRING	MD	20902
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.63132
Name of Employer		Occupation CLERGY	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"/> 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2150.00
<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 98 / 177

(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)  
MRS RAY E OLSEN 770

Mailing Address 2203 MEADOW GARDENS DR

City State Zip Code  
HOUSTON TX 77062

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  
1 0 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.60608

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR EDWARD S OLSON 296, JR

Mailing Address 204 BAKER RD  
PO BOX 1075

City State Zip Code  
EASLEY SC 29640

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 ▼  
530.00

Date of Receipt

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

Transaction ID: SA11AI.63592

Amount of Each Receipt this Period

80.00

**C.**

Full Name (Last, First, Middle Initial)  
MR EDWARD S OLSON 296, JR

Mailing Address 204 BAKER RD  
PO BOX 1075

City State Zip Code  
EASLEY SC 29640

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 ▼  
630.00

Date of Receipt

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

Transaction ID: SA11AI.63593

Amount of Each Receipt this Period

100.00

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

430.00

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

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

Use separate schedule(s)  
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(check only one)  
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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR EDWARD S OLSON 296, JR

Mailing Address 204 BAKER RD  
PO BOX 1075

City EASLEY State SC Zip Code 29640

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 ▼ 705.00

Date of Receipt: 10 / 31 / 2008  
**Transaction ID: SA11AI.63594**  
 Amount of Each Receipt this Period: 75.00

**B.** Full Name (Last, First, Middle Initial)  
MR EDWARD S OLSON 296, JR

Mailing Address 204 BAKER RD  
PO BOX 1075

City EASLEY State SC Zip Code 29640

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 ▼ 805.00

Date of Receipt: 11 / 13 / 2008  
**Transaction ID: SA11AI.63595**  
 Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
DOROTHY OLSON 520

Mailing Address 3730 PENNSYLVANIA AVE APT 104

City DUBUQUE State IA Zip Code 52002

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 ▼ 550.00

Date of Receipt: 10 / 29 / 2008  
**Transaction ID: SA11AI.56856**  
 Amount of Each Receipt this Period: 150.00

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

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

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

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

FOR LINE NUMBER: PAGE 100 / 177  
(check only one)  
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 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
DOROTHY OLSON 520  
Mailing Address 3730 PENNSYLVANIA AVE APT 104  
City DUBUQUE State IA Zip Code 52002  
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 ▼ 750.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.56857  
Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES WILLIAM OTT 077  
Mailing Address 1201 OCEAN AVE UNIT 1  
City BRADLEY BEACH State NJ Zip Code 07720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 10 / 20 / 2008  
Transaction ID: SA11AI.57241  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
MISS EDITH P PALMER 109  
Mailing Address 282 LAROE RD  
City CHESTER State NY Zip Code 10918  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation HOMEMAKER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 650.00  
Date of Receipt 10 / 28 / 2008  
Transaction ID: SA11AI.62021  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 600.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 177  
(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)  
SUZANNE A PALMER 980

Mailing Address 108 S 300TH PL

City State Zip Code  
**FEDERAL WAY WA 98003**

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

Name of Employer NONE Occupation **HOMEMAKER**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **2600.00**

Date of Receipt **10 / 27 / 2008**

**Transaction ID: SA11AI.56602**

Amount of Each Receipt this Period **600.00**

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES PANKONIEN 537

Mailing Address 2313 GOLD DR

City State Zip Code  
**FITCHBURG WI 53711**

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **10 / 30 / 2008**

**Transaction ID: SA11AI.63063**

Amount of Each Receipt this Period **100.00**

**C.** Full Name (Last, First, Middle Initial)  
MRS MARILYN PAOLICELLI 076

Mailing Address 1043 SOLDIER HILL RD

City State Zip Code  
**ORADELL NJ 07649**

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1050.00**

Date of Receipt **10 / 30 / 2008**

**Transaction ID: SA11AI.59795**

Amount of Each Receipt this Period **750.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1450.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 177  
(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)  
MRS THOMAS P PARKINSON 618

Mailing Address 42 LANGE AVE

City SAVOY State IL Zip Code 61874

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 11 / 17 / 2008  
**Transaction ID: SA11AI.56781**  
Amount of Each Receipt this Period: 100.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS NATALIA R PARRIS 177

Mailing Address PO BOX 45

City EAGLES MERE State PA Zip Code 17731

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 11 / 17 / 2008  
**Transaction ID: SA11AI.56986**  
Amount of Each Receipt this Period: 75.00

**C.**

Full Name (Last, First, Middle Initial)  
MISS JANE PASTELAK 194

Mailing Address 1192 LAURELWOOD RD

City POTTSTOWN State PA Zip Code 19465

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 ▼ 350.00

Date of Receipt: 10 / 30 / 2008  
**Transaction ID: SA11AI.63850**  
Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **225.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 177  
(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)  
MR WESLEY PAYNE 286

Mailing Address 355 GUILFORD RD

City State Zip Code  
**HARMONY NC 28634**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
MM / DD / YYYY  
**11 / 18 / 2008**

**Transaction ID: SA11AI.63895**

Amount of Each Receipt this Period  
35.00

**B.**

Full Name (Last, First, Middle Initial)  
MR J WRAY PEARCE 352

Mailing Address 1225 CEDARDELL LN

City State Zip Code  
**BIRMINGHAM AL 35216**

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

Name of Employer Occupation  
**PEARCE BEVILL LEESBURG MO-ORE, PC CPA**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
**11 / 21 / 2008**

**Transaction ID: SA11AI.62320**

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JENS T PEDERSON 563

Mailing Address 204 RAILROAD AVE W APT 109

City State Zip Code  
**ONAMIA MN 56359**

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 ▼  
380.00

Date of Receipt  
MM / DD / YYYY  
**10 / 27 / 2008**

**Transaction ID: SA11AI.60295**

Amount of Each Receipt this Period  
75.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 104 / 177  
(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 JENS T PEDERSON 563

Mailing Address 204 RAILROAD AVE W APT 109

City State Zip Code  
ONAMIA MN 56359

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) ▼ 455.00

Date of Receipt

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

Transaction ID: SA11AI.60297

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)  
MR JENS T PEDERSON 563

Mailing Address 204 RAILROAD AVE W APT 109

City State Zip Code  
ONAMIA MN 56359

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) ▼ 490.00

Date of Receipt

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

Transaction ID: SA11AI.60296

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JOHN PENSON 752

Mailing Address 3756 ARMSTRONG AVE

City State Zip Code  
DALLAS TX 75205

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

Name of Employer Occupation  
PENSON PROPERTIES INC INVESTOR

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

Date of Receipt

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

Transaction ID: SA11AI.59538

Amount of Each Receipt this Period

300.00

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

410.00

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

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

Use separate schedule(s)  
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(check only one)  
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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR MARVIN PERRY 921  
Mailing Address 6282 CHADWICK AVE  
City SAN DIEGO State CA Zip Code 92139  
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 ▼ 316.50  
Date of Receipt 10 / 29 / 2008  
Transaction ID: SA11AI.58461  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR LEROY PETERSON 515  
Mailing Address 1982 148TH ST  
City RED OAK State IA Zip Code 51566  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 299.00  
Date of Receipt 10 / 23 / 2008  
Transaction ID: SA11AI.62994  
Amount of Each Receipt this Period 199.00

**C.** Full Name (Last, First, Middle Initial)  
VERNE D J PHILIPS 787  
Mailing Address PO BOX 5970  
City AUSTIN State TX Zip Code 78763  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 208.00  
Date of Receipt 11 / 17 / 2008  
Transaction ID: SA11AI.60741  
Amount of Each Receipt this Period 53.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 352.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR WARREN PHILLIPS 271  
Mailing Address 455 S MAIN ST APT 202  
City WINSTON SALEM State NC Zip Code 27101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.63368  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR WAYNE L PHIPPS 805  
Mailing Address 5951 WC ROAD 8E  
City BERTHOUD State CO Zip Code 80513  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF EMPLOYED Occupation HORSESHOER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 10 / 27 / 2008  
Transaction ID: SA11AI.56361  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR RICHARD POINSATTE 468  
Mailing Address 1840 FLORIDA DR  
City FORT WAYNE State IN Zip Code 46805  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00  
Date of Receipt 11 / 03 / 2008  
Transaction ID: SA11AI.57181  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 300.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a    11b    11c    12  
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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MS BERNADINE M POLLOCK 894

Mailing Address 530 W MAIN ST SPC 2  
TRAILER 2

City FERNLEY State NV Zip Code 89408

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: 11 / 03 / 2008  
**Transaction ID: SA11AI.61086**  
 Amount of Each Receipt this Period: 200.00

**B.** Full Name (Last, First, Middle Initial)  
MR JOSEPH POPP 207

Mailing Address 2410 GRIFFEN ST

City HYATTSVILLE State MD Zip Code 20783

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 10 / 20 / 2008  
**Transaction ID: SA11AI.59644**  
 Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MRS SANDRA POPSON 178

Mailing Address 1001 PINE ST

City KULPMONT State PA Zip Code 17834

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 ▼ 205.00

Date of Receipt: 10 / 29 / 2008  
**Transaction ID: SA11AI.59359**  
 Amount of Each Receipt this Period: 60.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 360.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 108 / 177  
(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 SANDRA POPSON 178  
Mailing Address 1001 PINE ST

City State Zip Code  
KULPMONT PA 17834

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 ▼ 258.00

Date of Receipt: 10 / 31 / 2008  
Transaction ID: SA11AI.59360  
Amount of Each Receipt this Period: 53.00

**B.** Full Name (Last, First, Middle Initial)  
MRS SANDRA POPSON 178  
Mailing Address 1001 PINE ST

City State Zip Code  
KULPMONT PA 17834

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 ▼ 318.00

Date of Receipt: 11 / 07 / 2008  
Transaction ID: SA11AI.59362  
Amount of Each Receipt this Period: 60.00

**C.** Full Name (Last, First, Middle Initial)  
ORLO PORE 646  
Mailing Address 23374 INGALLS RD

City State Zip Code  
ROTHVILLE MO 64676

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 ▼ 215.00

Date of Receipt: 10 / 29 / 2008  
Transaction ID: SA11AI.61355  
Amount of Each Receipt this Period: 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 148.00

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

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

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

FOR LINE NUMBER: PAGE 109 / 177  
(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 MICKIE POWELL 678  
Mailing Address PO BOX 417

City State Zip Code  
SUBLETTE KS 67877

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  
11 / 03 / 2008

**Transaction ID:** SA11AI.61476

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
MR J C PRICE 306  
Mailing Address 255 BLUE HERON DR

City State Zip Code  
ATHENS GA 30605

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  
MM / DD / YYYY  
10 / 20 / 2008

**Transaction ID:** SA11AI.63442

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
MRS BARBARA PUCKETT 162  
Mailing Address 1499 STONEY LONESOME RD

City State Zip Code  
CLARION PA 16214

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
11 / 24 / 2008

**Transaction ID:** SA11AI.60017

Amount of Each Receipt this Period  
100.00

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

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

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

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

FOR LINE NUMBER: PAGE 110 / 177  
(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 LLOYD B PUTMAN 826

Mailing Address PO BOX 1655

City State Zip Code  
MILLS WY 82644

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 ▼ 211.00

Date of Receipt

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

Transaction ID: SA11AI.61644

Amount of Each Receipt this Period

60.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
MISS VIRGINIA QUINN 105

Mailing Address 144 BRUSH HOLLOW CRES

City State Zip Code  
RYE BROOK NY 10573

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 ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.62006

Amount of Each Receipt this Period

100.00
--------

**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 Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00

Date of Receipt

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

Transaction ID: SA11AI.58601

Amount of Each Receipt this Period

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

260.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 111 / 177  
(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)  
MS CLAIRE RAINS 941

Mailing Address 420 41ST AVE

City State Zip Code  
**SAN FRANCISCO CA 94121**

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 ▼ **445.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 21 2008**

**Transaction ID: SA11AI.59470**

Amount of Each Receipt this Period  
**80.00**

**B.**

Full Name (Last, First, Middle Initial)  
MS CLAIRE RAINS 941

Mailing Address 420 41ST AVE

City State Zip Code  
**SAN FRANCISCO CA 94121**

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 ▼ **545.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 24 2008**

**Transaction ID: SA11AI.59472**

Amount of Each Receipt this Period  
**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
MS CLAIRE RAINS 941

Mailing Address 420 41ST AVE

City State Zip Code  
**SAN FRANCISCO CA 94121**

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 ▼ **570.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 21 2008**

**Transaction ID: SA11AI.59471**

Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **205.00**

**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 112 / 177  
(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 ROBERT L RANKIN 989

Mailing Address PO BOX 168

City State Zip Code  
YAKIMA WA 98907

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  
1 1 / 1 9 / 2 0 0 8

**Transaction ID:** SA11AI.56414

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
MR CHARLES R RASH 201

Mailing Address 42991 CORALBELLS PL

City State Zip Code  
LEESBURG VA 20176

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

Name of Employer Occupation  
L-3 COMMUNICATIONS GOVERNMENT CONTRACTOR

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

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

**Transaction ID:** SA11AI.60073

Amount of Each Receipt this Period  
35.00

**C.** Full Name (Last, First, Middle Initial)  
MR CHARLES R RASH 201

Mailing Address 42991 CORALBELLS PL

City State Zip Code  
LEESBURG VA 20176

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

Name of Employer Occupation  
L-3 COMMUNICATIONS GOVERNMENT CONTRACTOR

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

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

**Transaction ID:** SA11AI.60075

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **335.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 113 / 177  
(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)  
MS SHERRY REED 452

Mailing Address 800 HUNTERSKNOLL LN

City State Zip Code  
CINCINNATI OH 45230

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

Name of Employer Occupation  
HOUSEWIFE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11AI.59865

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
DR WALLACE A REED 850

Mailing Address 4716 N DROMEDARY RD

City State Zip Code  
PHOENIX AZ 85018

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

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

Transaction ID: SA11AI.56374

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
DR WALLACE A REED 850

Mailing Address 4716 N DROMEDARY RD

City State Zip Code  
PHOENIX AZ 85018

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 ▼ 295.00

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

Transaction ID: SA11AI.56375

Amount of Each Receipt this Period  
60.00

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

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 114 / 177  
(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)  
MS RACHEL REES 956  
Mailing Address 6348 PIKES PEAK CIR  
City State Zip Code  
GARDEN VALLEY CA 95633  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt: 11 / 13 / 2008  
Transaction ID: SA11AI.59596  
Amount of Each Receipt this Period 35.00

**B.** Full Name (Last, First, Middle Initial)  
MR MAURICE REESE 537  
Mailing Address 713 LAKEWOOD BLVD  
City State Zip Code  
MADISON WI 53704  
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 ▼ 2500.00  
Date of Receipt: 10 / 22 / 2008  
Transaction ID: SA11AI.63062  
Amount of Each Receipt this Period 2000.00

**C.** Full Name (Last, First, Middle Initial)  
MRS MILDRED A REN 925  
Mailing Address 653 MASSACHUSETTS AVE  
City State Zip Code  
RIVERSIDE CA 92507  
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 ▼ 335.00  
Date of Receipt: 10 / 30 / 2008  
Transaction ID: SA11AI.58513  
Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2075.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 115 / 177  
(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 MILDRED A REN 925  
 Mailing Address 653 MASSACHUSETTS AVE  
 City RIVERSIDE State CA Zip Code 92507  
 Date of Receipt 11 / 05 / 2008  
**Transaction ID:** SA11AI.58510  
 Amount of Each Receipt this Period 60.00  
 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 395.00

**B.** Full Name (Last, First, Middle Initial)  
MRS MILDRED A REN 925  
 Mailing Address 653 MASSACHUSETTS AVE  
 City RIVERSIDE State CA Zip Code 92507  
 Date of Receipt 11 / 05 / 2008  
**Transaction ID:** SA11AI.58512  
 Amount of Each Receipt this Period 75.00  
 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 470.00

**C.** Full Name (Last, First, Middle Initial)  
MRS MILDRED A REN 925  
 Mailing Address 653 MASSACHUSETTS AVE  
 City RIVERSIDE State CA Zip Code 92507  
 Date of Receipt 11 / 24 / 2008  
**Transaction ID:** SA11AI.58511  
 Amount of Each Receipt this Period 45.00  
 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 515.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 180.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 116 / 177  
(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)  
MS ELIZABETH RENDLEMAN 794

Mailing Address 6202 4TH ST APT 168

City State Zip Code  
LUBBOCK TX 79416

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  
1 1 / 2 0 / 2 0 0 8

**Transaction ID:** SA11AI.61507

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
MR WILLIAM L ROBERTS 417

Mailing Address 1161 HALL MOUNTAIN RD

City State Zip Code  
VIPER KY 41774

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

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

**Transaction ID:** SA11AI.62505

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOSEPH ROETHELI 640

Mailing Address 10206 LIBERTY CIR

City State Zip Code  
LIBERTY MO 64068

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  
1 0 / 2 4 / 2 0 0 8

**Transaction ID:** SA11AI.59436

Amount of Each Receipt this Period  
250.00

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

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR HOMER J ROSE 156

Mailing Address 806 WELDON ST

City LATROBE State PA Zip Code 15650

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

**Transaction ID:** SA11AI.58371

Amount of Each Receipt this Period  
75.00

**B.** Full Name (Last, First, Middle Initial)  
MR EDGAR ROTHGEB 228

Mailing Address 1920 BIG OAK RD

City LURAY State VA Zip Code 22835

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 ▼ 350.00

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

**Transaction ID:** SA11AI.63259

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MISS CHARLYNE ROTHMAN 662

Mailing Address 7746 ABERDEEN RD

City PRAIRIE VILLAGE State KS Zip Code 66208

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 ▼ 286.00

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

**Transaction ID:** SA11AI.61406

Amount of Each Receipt this Period  
100.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 118 / 177  
(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)  
MS JANICE B RUBEL 331

Mailing Address 2000 S BAYSHORE DR

City State Zip Code  
**MIAMI FL 33133**

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

Name of Employer Occupation  
INNISFREE, INC IMPORT SPECIALIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **11 / 07 / 2008**

**Transaction ID: SA11AI.59281**

Amount of Each Receipt this Period **150.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR STAN A RYAN 986

Mailing Address PO BOX 88

City State Zip Code  
**CARROLLS WA 98609**

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 31 / 2008**

**Transaction ID: SA11AI.59102**

Amount of Each Receipt this Period **30.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR STAN A RYAN 986

Mailing Address PO BOX 88

City State Zip Code  
**CARROLLS WA 98609**

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 ▼ **220.00**

Date of Receipt **11 / 03 / 2008**

**Transaction ID: SA11AI.56772**

Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **190.00**

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

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

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

FOR LINE NUMBER: PAGE 119 / 177  
(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)  
MS HERLINDA SALINAS 785

Mailing Address PO BOX 46

City State Zip Code  
LASARA TX 78561

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

Name of Employer Occupation  
HOME HEALTH CARE PROVIDER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 255.00

Date of Receipt

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

Transaction ID: SA11AI.60053

Amount of Each Receipt this Period  
95.00

**B.**

Full Name (Last, First, Middle Initial)  
MR WALTER B SANDERS 758

Mailing Address PO BOX 465

City State Zip Code  
JEWETT TX 75846

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.56555

Amount of Each Receipt this Period  
100.00

**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:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 361.52

Date of Receipt

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

Transaction ID: SA11AI.59244

Amount of Each Receipt this Period  
30.00

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

225.00

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

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

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

FOR LINE NUMBER: PAGE 120 / 177  
(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

<b>A.</b>	Full Name (Last, First, Middle Initial) MRS ELIZABETH SCHAFFER 921		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 1 / 2 0 0 8	
	Mailing Address 610 1ST ST		<b>Transaction ID:</b> SA11AI.58443	
	City CORONADO	State CA	Zip Code 92118	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C			
	Name of Employer	Occupation HOMEMAKER		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) MRS ELIZABETH SCHAFFER 921		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 8	
	Mailing Address 610 1ST ST		<b>Transaction ID:</b> SA11AI.58442	
	City CORONADO	State CA	Zip Code 92118	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C			
	Name of Employer	Occupation HOMEMAKER		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) MRS ALYCE SCHLECH 760		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 8	
	Mailing Address 611 NE ALSBURY BLVD APT 524		<b>Transaction ID:</b> SA11AI.60532	
	City BURLESON	State TX	Zip Code 76028	Amount of Each Receipt this Period 53.00
	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 ▼ 349.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	553.00
<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 121 / 177  
(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 ALYCE SCHLECH 760  
Mailing Address 611 NE ALSBURY BLVD APT 524  
City State Zip Code  
BURLESON TX 76028  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 374.00  
Date of Receipt MM / DD / YYYY  
10 / 31 / 2008  
Transaction ID: SA11AI.60534  
Amount of Each Receipt this Period 25.00

**B.** Full Name (Last, First, Middle Initial)  
MRS ALYCE SCHLECH 760  
Mailing Address 611 NE ALSBURY BLVD APT 524  
City State Zip Code  
BURLESON TX 76028  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 427.00  
Date of Receipt MM / DD / YYYY  
11 / 21 / 2008  
Transaction ID: SA11AI.60533  
Amount of Each Receipt this Period 53.00

**C.** Full Name (Last, First, Middle Initial)  
MS BEVERLEE SCHMIDT 890  
Mailing Address 2761 RETREAD RD  
City State Zip Code  
PAHRUMP NV 89048  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 205.00  
Date of Receipt MM / DD / YYYY  
10 / 31 / 2008  
Transaction ID: SA11AI.60942  
Amount of Each Receipt this Period 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 118.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 122 / 177  
(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 CHARLES SCHROEDER 920

Mailing Address 1973 BATCHELDER CT

City State Zip Code  
EL CAJON CA 92020

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) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.59998

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
MR HUBERT E SHADRICK 980

Mailing Address 5821 200TH ST SW APT 127

City State Zip Code  
LYNNWOOD WA 98036

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.58967

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)  
MR NED SHANAMAN 170

Mailing Address 103 N RACE ST 163

City State Zip Code  
RICHLAND PA 17087

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) ▼ 230.00

Date of Receipt

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

Transaction ID: SA11AI.59491

Amount of Each Receipt this Period

70.00

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

170.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 177  
(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 AUBREY SHEA 201

Mailing Address 7192 BETHEL DR W

City State Zip Code  
**WARRENTON VA 20187**

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 ▼ **775.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 17 / 2008**

**Transaction ID: SA11AI.63109**

Amount of Each Receipt this Period  
**210.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR AUBREY SHEA 201

Mailing Address 7192 BETHEL DR W

City State Zip Code  
**WARRENTON VA 20187**

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 ▼ **985.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 20 / 2008**

**Transaction ID: SA11AI.63108**

Amount of Each Receipt this Period  
**210.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR AUBREY SHEA 201

Mailing Address 7192 BETHEL DR W

City State Zip Code  
**WARRENTON VA 20187**

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 ▼ **1265.00**

Date of Receipt  
M M / D D / Y Y Y Y Y  
**10 / 29 / 2008**

**Transaction ID: SA11AI.63111**

Amount of Each Receipt this Period  
**280.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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

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

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

FOR LINE NUMBER: PAGE 124 / 177  
(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 AUBREY SHEA 201

Mailing Address 7192 BETHEL DR W

City State Zip Code  
WARRENTON VA 20187

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) ▼ 1315.00

Date of Receipt

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

Transaction ID: SA11AI.63110

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS DEBORAH J SHERLOCK 432

Mailing Address 474 S TERRACE AVE

City State Zip Code  
COLUMBUS OH 43204

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) ▼ 285.00

Date of Receipt

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

Transaction ID: SA11AI.59990

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS DEBORAH J SHERLOCK 432

Mailing Address 474 S TERRACE AVE

City State Zip Code  
COLUMBUS OH 43204

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) ▼ 310.00

Date of Receipt

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

Transaction ID: SA11AI.59991

Amount of Each Receipt this Period

25.00

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 125 / 177  
(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 DEBORAH J SHERLOCK 432  
Mailing Address 474 S TERRACE AVE

City State Zip Code  
COLUMBUS OH 43204

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 ▼ 335.00

Date of Receipt: 10 / 28 / 2008  
Transaction ID: SA11AI.59992  
Amount of Each Receipt this Period: 25.00

**B.** Full Name (Last, First, Middle Initial)  
MRS DEBORAH J SHERLOCK 432  
Mailing Address 474 S TERRACE AVE

City State Zip Code  
COLUMBUS OH 43204

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 ▼ 360.00

Date of Receipt: 11 / 17 / 2008  
Transaction ID: SA11AI.59989  
Amount of Each Receipt this Period: 25.00

**C.** Full Name (Last, First, Middle Initial)  
CHARLES SHOEMATE 329  
Mailing Address 71 DOVE PLUM RD

City State Zip Code  
VERO BEACH FL 32963

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 03 / 2008  
Transaction ID: SA11AI.60098  
Amount of Each Receipt this Period: 500.00

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

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

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

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

FOR LINE NUMBER: PAGE 126 / 177  
(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 JOSEPH SHOWALTER 206

Mailing Address PO BOX 220

City

PORT REPUBLIC

State

MD

Zip Code

20676

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1850.00

Date of Receipt

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

Transaction ID: SA11AI.56937

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOSEPH SHOWALTER 206

Mailing Address PO BOX 220

City

PORT REPUBLIC

State

MD

Zip Code

20676

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

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

Transaction ID: SA11AI.56938

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

THEODORE J SIEK 189

Mailing Address 315 BEAVER RD

City

SOUTHAMPTON

State

PA

Zip Code

18966

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
ANALYTIC BIO CHEMISTRIES

Occupation  
CHEMIST

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: SA11AI.56773

Amount of Each Receipt this Period

400.00

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

550.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 177  
(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)  
MR LEONARD SIGURDSEN 550

Mailing Address 4169 W BIRCHVIEW RD

City State Zip Code  
**GRASSTON MN 55030**

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

Name of Employer Occupation  
SELF EMPLOYED FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11AI.60204

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ALLEN H SIMON 852

Mailing Address 1383 N CRISS ST

City State Zip Code  
**CHANDLER AZ 85226**

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 ▼ 1200.00

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

Transaction ID: SA11AI.60819

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JOHN P SKAGERBERG 554

Mailing Address 5300 OAK GROVE PKWY N APT 305

City State Zip Code  
**MINNEAPOLIS MN 55443**

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

Transaction ID: SA11AI.59940

Amount of Each Receipt this Period  
75.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 128 / 177  
(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)  
MISS ELIZABETH SKAPIN 441

Mailing Address 4445 W 215TH ST

City State Zip Code  
**CLEVELAND OH 44126**

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 ▼ **294.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 27 / 2008**

**Transaction ID: SA11AI.62603**

Amount of Each Receipt this Period  
**27.00**

**B.**

Full Name (Last, First, Middle Initial)  
MISS ELIZABETH SKAPIN 441

Mailing Address 4445 W 215TH ST

City State Zip Code  
**CLEVELAND OH 44126**

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 ▼ **321.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 / 24 / 2008**

**Transaction ID: SA11AI.62602**

Amount of Each Receipt this Period  
**27.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR JOHN F SLANGA 194

Mailing Address 684 RIDGE RD

City State Zip Code  
**SPRING CITY PA 19475**

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

Name of Employer 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  
**11 / 21 / 2008**

**Transaction ID: SA11AI.63853**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **304.00**

**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 129 / 177
	<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 HENRY B SMITH 170		Date of Receipt MM / DD / YYYY 11 / 17 / 2008
Mailing Address 1440 HORSESHOE PIKE		<b>Transaction ID:</b> SA11AI.63705
City <b>LEBANON</b>	State <b>PA</b>	Zip Code <b>17042</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>35.00</b>
Name of Employer NONE	Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>225.00</b>	

**B.**

Full Name (Last, First, Middle Initial) COL RAY H SMITH 296		Date of Receipt MM / DD / YYYY 11 / 18 / 2008
Mailing Address 228 LAKESIDE CIR		<b>Transaction ID:</b> SA11AI.63590
City <b>GREENVILLE</b>	State <b>SC</b>	Zip Code <b>29615</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>75.00</b>
Name of Employer US MILITARY	Occupation <b>OFFICER</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>375.00</b>	

**C.**

Full Name (Last, First, Middle Initial) MRS HELEN L SMITH 522		Date of Receipt MM / DD / YYYY 10 / 27 / 2008
Mailing Address 5954 COUNTY ROAD X40		<b>Transaction ID:</b> SA11AI.62998
City <b>ANAMOSA</b>	State <b>IA</b>	Zip Code <b>52205</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>35.00</b>
Name of Employer NONE	Occupation <b>RETIRED</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>235.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>145.00</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 130 / 177  
(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)  
MRS HELEN L SMITH 522

Mailing Address 5954 COUNTY ROAD X40

City ANAMOSA State IA Zip Code 52205

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 ▼ 270.00

Date of Receipt: 11 / 19 / 2008  
**Transaction ID: SA11AI.62999**  
 Amount of Each Receipt this Period: 35.00

**B.**

Full Name (Last, First, Middle Initial)  
JANE SMITH 871

Mailing Address 3390 SAINT ANDREWS DR SE

City RIO RANCHO State NM Zip Code 87124

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

Name of Employer NONE Occupation WIDOW

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 623.00

Date of Receipt: 10 / 17 / 2008  
**Transaction ID: SA11AI.56395**  
 Amount of Each Receipt this Period: 150.00

**C.**

Full Name (Last, First, Middle Initial)  
JANE SMITH 871

Mailing Address 3390 SAINT ANDREWS DR SE

City RIO RANCHO State NM Zip Code 87124

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

Name of Employer NONE Occupation WIDOW

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 698.00

Date of Receipt: 10 / 21 / 2008  
**Transaction ID: SA11AI.56396**  
 Amount of Each Receipt this Period: 75.00

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

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

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

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

FOR LINE NUMBER: PAGE 131 / 177  
(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 LAWRENCE SMITH 972  
Mailing Address 2840 NW 35TH AVE  
City PORTLAND State OR Zip Code 97210  
FEC ID number of contributing federal political committee. **C**  
Name of Employer JOURNAL GRAPHICS Occupation EXECUTIVE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 11 / 17 / 2008  
Transaction ID: SA11AI.59493  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
MR GORDON SMYTH 229  
Mailing Address 250 PANTOPS MOUNTAIN RD APT 61  
City CHARLOTTESVILLE State VA Zip Code 22911  
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 10 / 30 / 2008  
Transaction ID: SA11AI.59830  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
MISS EMMA SNEDEKER 026  
Mailing Address 110 STAGE NECK RD  
City CHATHAM State MA Zip Code 02633  
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 11 / 03 / 2008  
Transaction ID: SA11AI.61704  
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 132 / 177  
(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)  
MRS ELIZABETH SOECHTING 852

Mailing Address 1200 9TH ST #2032

City State Zip Code  
SCOTTSDALE AZ 85260

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt

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

Transaction ID: SA11AI.60844

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS ELIZABETH SOECHTING 852

Mailing Address 1200 9TH ST #2032

City State Zip Code  
SCOTTSDALE AZ 85260

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt

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

Transaction ID: SA11AI.60843

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS ELIZABETH SOECHTING 852

Mailing Address 1200 9TH ST #2032

City State Zip Code  
SCOTTSDALE AZ 85260

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	9		2	0	0	8

Transaction ID: SA11AI.60845

Amount of Each Receipt this Period

15.00

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

55.00

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

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

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

FOR LINE NUMBER: PAGE 133 / 177  
(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 DOREEN G SOLOMON 913  
Mailing Address 19843 LINNET ST  
City State Zip Code  
WOODLAND HILLS CA 91364  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 301.00  
Date of Receipt: 10 / 22 / 2008  
Transaction ID: SA11AI.61196  
Amount of Each Receipt this Period: 113.00

**B.** Full Name (Last, First, Middle Initial)  
MS MADELEINE SOUDEE 200  
Mailing Address 2325 20TH ST NW  
City State Zip Code  
WASHINGTON DC 20009  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt: 10 / 29 / 2008  
Transaction ID: SA11AI.63101  
Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
MS MADELEINE SOUDEE 200  
Mailing Address 2325 20TH ST NW  
City State Zip Code  
WASHINGTON DC 20009  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 260.00  
Date of Receipt: 11 / 18 / 2008  
Transaction ID: SA11AI.63099  
Amount of Each Receipt this Period: 35.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 198.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 134 / 177  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**BLACK REPUBLICAN PAC**

**A.**

Full Name (Last, First, Middle Initial)  
MS MADELEINE SOUDEE 200

Mailing Address 2325 20TH ST NW

City WASHINGTON State DC Zip Code 20009

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt: 11 / 24 / 2008  
Transaction ID: SA11AI.63098  
Amount of Each Receipt this Period: 25.00

**B.**

Full Name (Last, First, Middle Initial)  
DR WILBER B SPALDING 662, JR

Mailing Address 6900 OVERHILL RD

City MISSION HILLS State KS Zip Code 66208

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

Name of Employer Occupation DOCTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt: 10 / 23 / 2008  
Transaction ID: SA11AI.61405  
Amount of Each Receipt this Period: 100.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ROBERT A SPANSKY 483

Mailing Address 38916 LANCASTER DR

City FARMINGTON HILLS State MI Zip Code 48331

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

Name of Employer Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt: 11 / 07 / 2008  
Transaction ID: SA11AI.62865  
Amount of Each Receipt this Period: 70.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 195.00

**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 135 / 177  
(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 BOYD W STEPHENSON 244

Mailing Address PO BOX 104

City State Zip Code  
**MONTEREY VA 24465**

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

Name of Employer NONE Occupation **SELF EMPLOYED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **507.00**

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

**Transaction ID: SA11AI.63340**

Amount of Each Receipt this Period  
**150.00**

**B.**

Full Name (Last, First, Middle Initial)  
MR CHARLES B STEVENSON 157

Mailing Address 1398 SCHOOL ST

City State Zip Code  
**INDIANA PA 15701**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

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

**Transaction ID: SA11AI.63662**

Amount of Each Receipt this Period  
**25.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR CHARLES B STEVENSON 157

Mailing Address 1398 SCHOOL ST

City State Zip Code  
**INDIANA PA 15701**

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 ▼ **375.00**

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

**Transaction ID: SA11AI.63663**

Amount of Each Receipt this Period  
**50.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **225.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 / 177  
(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 HERBERT STOCKHAM 352

Mailing Address 2940 ARGYLE RD

City State Zip Code  
**BIRMINGHAM AL 35213**

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

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

**Transaction ID: SA11AI.62319**

Amount of Each Receipt this Period  
**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
MISS MARY F STORY 982

Mailing Address 4980 CASCADE PL

City State Zip Code  
**OAK HARBOR WA 98277**

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 ▼  
**230.00**

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

**Transaction ID: SA11AI.58999**

Amount of Each Receipt this Period  
**25.00**

**C.**

Full Name (Last, First, Middle Initial)  
ADA STRASENBURGH 082

Mailing Address PO BOX 608

City State Zip Code  
**OCEAN VIEW NJ 08230**

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

Name of Employer Occupation  
NONE RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**700.00**

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

**Transaction ID: SA11AI.61928**

Amount of Each Receipt this Period  
**100.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

**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 137 / 177  
(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)  
ADA ANDERSON STRASENBURGH 082

Mailing Address PO BOX 608

City State Zip Code  
**OCEAN VIEW NJ 08230**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 / 04 / 2008**

**Transaction ID: SA11AI.61926**

Amount of Each Receipt this Period  
**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
ADA ANDERSON STRASENBURGH 082

Mailing Address PO BOX 608

City State Zip Code  
**OCEAN VIEW NJ 08230**

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 / 19 / 2008**

**Transaction ID: SA11AI.61927**

Amount of Each Receipt this Period  
**150.00**

**C.**

Full Name (Last, First, Middle Initial)  
MR JOHN STRONG 900

Mailing Address 1432 CRENSHAW BLVD

City State Zip Code  
**LOS ANGELES CA 90019**

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

Name of Employer LA COUNTY AUDITOR Occupation **INTERMEDIATE CLERK**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 16 / 2008**

**Transaction ID: SA11AI.57055**

Amount of Each Receipt this Period  
**45.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **295.00**

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

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

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

FOR LINE NUMBER: PAGE 138 / 177  
(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 JOHN STRONG 900

Mailing Address 1432 CRENSHAW BLVD

City State Zip Code  
LOS ANGELES CA 90019

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

Name of Employer Occupation  
LA COUNTY AUDITOR INTERMEDIATE CLERK

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1925.00

Date of Receipt

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

Transaction ID: SA11AI.57057

Amount of Each Receipt this Period

1700.00
---------

**B.**

Full Name (Last, First, Middle Initial)  
MR JOHN STRONG 900

Mailing Address 1432 CRENSHAW BLVD

City State Zip Code  
LOS ANGELES CA 90019

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

Name of Employer Occupation  
LA COUNTY AUDITOR INTERMEDIATE CLERK

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4425.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	0	8

Transaction ID: SA11AI.57056

Amount of Each Receipt this Period

2500.00
---------

**C.**

Full Name (Last, First, Middle Initial)  
MR JOHN STRONG 900

Mailing Address 1432 CRENSHAW BLVD

City State Zip Code  
LOS ANGELES CA 90019

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

Name of Employer Occupation  
LA COUNTY AUDITOR INTERMEDIATE CLERK

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4435.00

Date of Receipt

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

Transaction ID: SA11AI.57054

Amount of Each Receipt this Period

10.00
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**SUBTOTAL** of Receipts This Page (optional) .....

4210.00
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**TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 139 / 177  
(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 THOMAS STROPKI 439

Mailing Address 2901 TOWNSHIP ROAD 275

City State Zip Code  
AMSTERDAM OH 43903

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) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.62578

Amount of Each Receipt this Period

25.00
-------

**B.**

Full Name (Last, First, Middle Initial)  
MR THOMAS STROPKI 439

Mailing Address 2901 TOWNSHIP ROAD 275

City State Zip Code  
AMSTERDAM OH 43903

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) ▼ 275.00

Date of Receipt

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

Transaction ID: SA11AI.62577

Amount of Each Receipt this Period

25.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
ZDZISLAW K STRZALKOWSKI 170

Mailing Address 6 DANDELION DR

City State Zip Code  
BOILING SPRINGS PA 17007

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

Name of Employer Occupation  
NONE NOT EMPLOYED

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1050.00

Date of Receipt

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

Transaction ID: SA11AI.57444

Amount of Each Receipt this Period

1000.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ▶

1050.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 140 / 177  
(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)  
ZDZISLAW K STRZALKOWSKI 170  
Mailing Address 6 DANDELION DR

City State Zip Code  
BOILING SPRINGS PA 17007

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

Name of Employer NONE Occupation NOT EMPLOYED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1150.00

Date of Receipt: 11 / 17 / 2008  
Transaction ID: SA11AI.57443  
Amount of Each Receipt this Period: 100.00

**B.** Full Name (Last, First, Middle Initial)  
MS ANN SWEENEY 183  
Mailing Address PO BOX 281

City State Zip Code  
POCONO SUMMIT PA 18346

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: 11 / 18 / 2008  
Transaction ID: SA11AI.63769  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR JOHN M SWEET 803  
Mailing Address 334 S 68TH ST

City State Zip Code  
BOULDER CO 80303

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: 11 / 03 / 2008  
Transaction ID: SA11AI.60871  
Amount of Each Receipt this Period: 50.00

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

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

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

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

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(check only one)  
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 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR JAMES F TACKER 372, JR  
Mailing Address 4405 GLENDALE SQ  
City NASHVILLE State TN Zip Code 37204  
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 ▼ 220.00  
Date of Receipt 10 / 22 / 2008  
Transaction ID: SA11AI.62373  
Amount of Each Receipt this Period 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR DONALD TAYLOR 211  
Mailing Address 3500 NICHOLSON RD  
City WESTMINSTER State MD Zip Code 21157  
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 ▼ 350.00  
Date of Receipt 11 / 14 / 2008  
Transaction ID: SA11AI.63184  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
MR RAY TAYLOR 373  
Mailing Address 102 WOODCLIFF CIR  
City SIGNAL MOUNTAIN State TN Zip Code 37377  
FEC ID number of contributing federal political committee. **C**  
Name of Employer TEXTILE RUBBER & CHEMICAL CO Occupation PRESIDENT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: SA11AI.62386  
Amount of Each Receipt this Period 750.00

**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  
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(check only one)  
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 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR ROBERT TAYLOR 550  
 Mailing Address 805 FOREST AVE APT 2B  
 City NORTHFIELD State MN Zip Code 55057  
 Date of Receipt 10 / 24 / 2008  
 Transaction ID: SA11AI.59252  
 Amount of Each Receipt this Period 100.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 455.00

**B.** Full Name (Last, First, Middle Initial)  
MR ROBERT TAYLOR 550  
 Mailing Address 805 FOREST AVE APT 2B  
 City NORTHFIELD State MN Zip Code 55057  
 Date of Receipt 11 / 21 / 2008  
 Transaction ID: SA11AI.59253  
 Amount of Each Receipt this Period 75.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 530.00

**C.** Full Name (Last, First, Middle Initial)  
MRS ROSE S TCHANG 921  
 Mailing Address 5303 ALTA BAHIA CT  
 City SAN DIEGO State CA Zip Code 92109  
 Date of Receipt 11 / 21 / 2008  
 Transaction ID: SA11AI.58427  
 Amount of Each Receipt this Period 50.00  
 FEC ID number of contributing federal political committee. C  
 Name of Employer NONE Occupation HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

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

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

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

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(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 FRANCIS G TENBUSCH 496

Mailing Address 743 MUNSON AVE

City State Zip Code  
TRAVERSE CITY MI 49686

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

Name of Employer Occupation  
STEPHAN WOOD PRODUCTS INC OWNER

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

Date of Receipt

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

Transaction ID: SA11AI.56627

Amount of Each Receipt this Period

200.00
--------

**B.**

Full Name (Last, First, Middle Initial)  
DR L K THOMAS 221, JR

Mailing Address 13854 DELANEY RD

City State Zip Code  
WOODBIDGE VA 22193

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 ▼ 298.00

Date of Receipt

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

Transaction ID: SA11AI.63236

Amount of Each Receipt this Period

50.00
-------

**C.**

Full Name (Last, First, Middle Initial)  
MR WILLIAM N THOMAS 221

Mailing Address 1739 KIRBY RD # 114

City State Zip Code  
MC LEAN VA 22101

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.63225

Amount of Each Receipt this Period

40.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ▶

290.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 / 177
	<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 LINCOLN THOMPSON 064, JR		Date of Receipt	
	Mailing Address 142 N COVE RD		M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.61820
	OLD SAYBROOK	CT	06475	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		300.00	
Name of Employer VIRGINIA INDUSTRIES		Occupation CHAIRMAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 550.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) MRS MARY E THOMSON 985		Date of Receipt	
	Mailing Address 1835 CIRCLE LN SE APT 304		M M / D D / Y Y Y Y Y 1 1 / 1 7 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.59018
	LACEY	WA	98503	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		53.00	
Name of Employer NONE		Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 219.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) MRS CATHERINE THREET 770		Date of Receipt	
	Mailing Address 150 GESSNER RD UNIT 9A		M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.60594
	HOUSTON	TX	77024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		125.00	
Name of Employer NONE		Occupation HOUSEWIFE		
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) .....	▶	478.00
<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  
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(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 ALBERT TOVAR 951  
Mailing Address 4966 KINGSTON WAY

City State Zip Code  
SAN JOSE CA 95130

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 ▼ 225.00

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

Transaction ID: SA11AI.58754

Amount of Each Receipt this Period  
225.00

**B.**

Full Name (Last, First, Middle Initial)  
MR RICHARD G TRACY 502  
Mailing Address 2407 265TH ST

City State Zip Code  
PERU IA 50222

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 285.00

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

Transaction ID: SA11AI.62969

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS BARBARA TRAVAGLINI 193  
Mailing Address 4000 HAZELWOOD AVE

City State Zip Code  
DOWNTOWN PA 19335

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

Transaction ID: SA11AI.57043

Amount of Each Receipt this Period  
150.00

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

475.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(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)  
MRS MABEL TRIEBWASSER 573

Mailing Address 1005 W BIRCH AVE

City State Zip Code  
MITCHELL SD 57301

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 20 / 2008  
Transaction ID: SA11AI.59527  
Amount of Each Receipt this Period: 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR C M TURMAN 191, III

Mailing Address 8315 SAINT MARTINS LN

City State Zip Code  
PHILADELPHIA PA 19118

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt: 11 / 21 / 2008  
Transaction ID: SA11AI.63812  
Amount of Each Receipt this Period: 100.00

**C.** Full Name (Last, First, Middle Initial)  
MR GEORGE VACEK 766

Mailing Address 5053 HIGHWAY 164 E

City State Zip Code  
GROESBECK TX 76642

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt: 10 / 29 / 2008  
Transaction ID: SA11AI.59642  
Amount of Each Receipt this Period: 40.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **190.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(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)  
MISS ELOISE R VALINET 462

Mailing Address 5300 W 96TH ST

City State Zip Code  
INDIANAPOLIS IN 46268

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

**Transaction ID:** SA11AI.62735

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)  
MR WILLIAM R VIVIAN 236

Mailing Address 955 HARPERSVILLE RD APT 3043

City State Zip Code  
NEWPORT NEWS VA 23601

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 695.00

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

**Transaction ID:** SA11AI.63307

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
MR M C VOGEL 928

Mailing Address 1000 SEGOVIA CIR

City State Zip Code  
PLACENTIA CA 92870

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

Name of Employer Occupation RETIRD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

**Transaction ID:** SA11AI.57638

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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

**SCHEDULE A (FEC Form 3X)  
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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR FRANK H WALK 701  
Mailing Address 150 BROADWAY ST APT 1112  
City NEW ORLEANS State LA Zip Code 70118  
FEC ID number of contributing federal political committee. **C**  
Name of Employer WALK, HAYDEL & ASSOC Occupation PARTNER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00  
Date of Receipt 11 / 18 / 2008  
Transaction ID: SA11AI.60343  
Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
MS ELLEN WALKER 648  
Mailing Address PO BOX 26  
City GRANBY State MO Zip Code 64844  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation IN HOME AIDE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 230.00  
Date of Receipt 10 / 21 / 2008  
Transaction ID: SA11AI.61359  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
MS ELLEN WALKER 648  
Mailing Address PO BOX 26  
City GRANBY State MO Zip Code 64844  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation IN HOME AIDE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 280.00  
Date of Receipt 10 / 31 / 2008  
Transaction ID: SA11AI.61358  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 300.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 149 / 177  
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 11a    11b    11c    12  
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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MR JOSEPH M WEAVER 298  
Mailing Address 125 MIDLAND DR  
City GRANITEVILLE State SC Zip Code 29829  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 11 / 06 / 2008  
Transaction ID: SA11AI.63610  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
MR LEROY WEBER 945, JR  
Mailing Address PO BOX 355  
City RIO VISTA State CA Zip Code 94571  
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 ▼ 1000.00  
Date of Receipt 11 / 17 / 2008  
Transaction ID: SA11AI.58699  
Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
MR RICHARD L WELLS 120  
Mailing Address 49 WOODSTEAD RD  
City BALLSTON LAKE State NY Zip Code 12019  
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 ▼ 1000.00  
Date of Receipt 10 / 30 / 2008  
Transaction ID: SA11AI.58213  
Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1700.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

**A.** Full Name (Last, First, Middle Initial)  
MRS ELIZABETH A WELLS 122

Mailing Address 74 DELAFIELD DR

City State Zip Code  
ALBANY NY 12205

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

Name of Employer NONE Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
11 / 18 / 2008

**Transaction ID:** SA11AI.58222

Amount of Each Receipt this Period  
40.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES WESTFALL 329

Mailing Address 1035 MAYFLOWER AVE

City State Zip Code  
MELBOURNE FL 32940

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

Name of Employer US NAVY Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
10 / 27 / 2008

**Transaction ID:** SA11AI.59295

Amount of Each Receipt this Period  
75.00

**C.** Full Name (Last, First, Middle Initial)  
MR JAMES WESTFALL 329

Mailing Address 1035 MAYFLOWER AVE

City State Zip Code  
MELBOURNE FL 32940

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

Name of Employer US NAVY Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
10 / 27 / 2008

**Transaction ID:** SA11AI.59296

Amount of Each Receipt this Period  
100.00

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

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 151 / 177  
(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 JAMES WESTFALL 329

Mailing Address 1035 MAYFLOWER AVE

City MELBOURNE State FL Zip Code 32940

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

Name of Employer US NAVY Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: 10 / 27 / 2008  
**Transaction ID:** SA11AI.59298  
 Amount of Each Receipt this Period: 50.00

**B.** Full Name (Last, First, Middle Initial)  
MR JAMES WESTFALL 329

Mailing Address 1035 MAYFLOWER AVE

City MELBOURNE State FL Zip Code 32940

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

Name of Employer US NAVY Occupation RETIRED

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 18 / 2008  
**Transaction ID:** SA11AI.59297  
 Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
MRS JANICE WETZEL 435

Mailing Address 7550 CODER RD

City MAUMEE State OH Zip Code 43537

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

Name of Employer SELF EMPLOYED Occupation REALTOR

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 17 / 2008  
**Transaction ID:** SA11AI.56921  
 Amount of Each Receipt this Period: 500.00

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

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

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

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

FOR LINE NUMBER: PAGE 152 / 177  
(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)  
MRS JANICE WETZEL 435  
Mailing Address 7550 CODER RD  
City MAUMEE State OH Zip Code 43537  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SELF EMPLOYED Occupation REALTOR  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 10 / 24 / 2008  
Transaction ID: SA11AI.56922  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
MRS VIRGINIA WHEELER 403  
Mailing Address PO BOX 217  
City MOREHEAD State KY Zip Code 40351  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 748.00  
Date of Receipt 10 / 17 / 2008  
Transaction ID: SA11AI.62485  
Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
MRS VIRGINIA WHEELER 403  
Mailing Address PO BOX 217  
City MOREHEAD State KY Zip Code 40351  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 848.00  
Date of Receipt 10 / 23 / 2008  
Transaction ID: SA11AI.62486  
Amount of Each Receipt this Period 100.00

**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 153 / 177  
(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)  
DANIEL WIESMAN 372

Mailing Address 84 LESTER AVE APT 231

City State Zip Code  
NASHVILLE TN 37210

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
243.00

Date of Receipt  

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

**Transaction ID:** SA11AI.56685

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
MR ROLAND F WILKINSON 320

Mailing Address 5473 PELICAN WAY

City State Zip Code  
SAINT AUGUSTINE FL 32080

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 ▼  
253.00

Date of Receipt  

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

**Transaction ID:** SA11AI.63484

Amount of Each Receipt this Period  
57.00

**C.** Full Name (Last, First, Middle Initial)  
MS VELMA WITZKE 926

Mailing Address 18 GLADSTONE

City State Zip Code  
IRVINE CA 92606

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 ▼  
208.00

Date of Receipt  

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

**Transaction ID:** SA11AI.58522

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **132.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 154 / 177  
(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)  
MS GISELA WOIWODE-DALES 296

Mailing Address 8 GARY AVE

City State Zip Code  
TAYLORS SC 29687

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 ▼  
271.00

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

Transaction ID: SA11AI.63599

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
MS GISELA WOIWODE-DALES 296

Mailing Address 8 GARY AVE

City State Zip Code  
TAYLORS SC 29687

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 ▼  
296.00

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

Transaction ID: SA11AI.63598

Amount of Each Receipt this Period  
25.00

**C.**

Full Name (Last, First, Middle Initial)  
MS GISELA WOIWODE-DALES 296

Mailing Address 8 GARY AVE

City State Zip Code  
TAYLORS SC 29687

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 ▼  
321.00

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

Transaction ID: SA11AI.63597

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **75.00**

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

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

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

FOR LINE NUMBER: PAGE 155 / 177  
(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)  
HAROLD YORK 773

Mailing Address 55 PEBBLE COVE DR

City State Zip Code  
THE WOODLANDS TX 77381

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

**Transaction ID:** SA11AI.57111

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
MRS HARRIET YOUNG 922

Mailing Address 81910 ARUS AVE

City State Zip Code  
INDIO CA 92201

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

Name of Employer Occupation  
YOUNG & SONS NURSERY BUSINESS OWNER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

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

**Transaction ID:** SA11AI.58464

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
MRS HARRIET YOUNG 922

Mailing Address 81910 ARUS AVE

City State Zip Code  
INDIO CA 92201

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

Name of Employer Occupation  
YOUNG & SONS NURSERY BUSINESS OWNER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

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

**Transaction ID:** SA11AI.58463

Amount of Each Receipt this Period  
200.00

**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 156 / 177  
(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)  
MRS HARRIET YOUNG 922

Mailing Address 81910 ARUS AVE

City State Zip Code  
INDIO CA 92201

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

Name of Employer Occupation  
YOUNG & SONS NURSERY BUSINESS OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

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

Transaction ID: SA11AI.58465

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR ROBERT F ZOELLER 402

Mailing Address 1909 ELMORE ST

City State Zip Code  
LOUISVILLE KY 40216

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

Name of Employer Occupation  
ZOELLER COMPANY OFFICER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

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

Transaction ID: SA11AI.62476

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
MR ROBERT F ZOELLER 402

Mailing Address 1909 ELMORE ST

City State Zip Code  
LOUISVILLE KY 40216

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

Name of Employer Occupation  
ZOELLER COMPANY OFFICER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2700.00

Date of Receipt

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

Transaction ID: SA11AI.62475

Amount of Each Receipt this Period

700.00

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

1800.00

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

70365.00

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

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

FOR LINE NUMBER: (check only one)

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) AVALANCHE SERVICES</p> <p>Mailing Address 53 MCGARRY BLVD</p> <p>City KEARNYSVILLE State WV Zip Code 25430</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.63926</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="8086.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.63927</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="14243.33"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.63928</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6343.82"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="28673.15"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.63930 <b>Date of Disbursement</b> 11 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 8067.22</p> <p>003 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) CATTERTON PRINTING</p> <p>Mailing Address 100 POST OFFICE RD</p> <p>City WALDORF State MD Zip Code 20602</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.63931 <b>Date of Disbursement</b> 10 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 11304.00</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.63932 <b>Date of Disbursement</b> 10 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 35827.46</p> <p>003 Category/ Type</p>

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

55198.68

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 159 / 177

<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.63933 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="10"/> <input type="text" value="30"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="12673.65"/>
	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.63934 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="06"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="11321.66"/>
	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.63935 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="13"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="20155.82"/>
	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="44151.13"/>
<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)

PAGE 160 / 177

<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

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.63937  
Date of Disbursement

11 / 20 / 2008

Amount of Each Disbursement this Period

16861.08

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

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DATA PROCESSING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.63939  
Date of Disbursement

10 / 24 / 2008

Amount of Each Disbursement this Period

4900.48

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

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DATA PROCESSING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.63940  
Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

2757.32

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

24518.88

**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) CENTURY DATA SYSTEMS	Transaction ID: SB21B.63941 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="11"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="2992.58"/>
	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) COLORTREE	Transaction ID: SB21B.63942 Date of Disbursement
	Mailing Address 2519 BRITTONS HILL RD	<input type="text" value="10"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City RICHMOND State VA Zip Code 23230	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="2283.75"/>
	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) COLORTREE	Transaction ID: SB21B.63943 Date of Disbursement
	Mailing Address 2519 BRITTONS HILL RD	<input type="text" value="10"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City RICHMOND State VA Zip Code 23230	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="4205.25"/>
	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="9481.58"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
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 FUNDRAISING

Candidate Name  
BLACK REPUBLICAN PAC

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.63944  
Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

4058.70

**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 FUNDRAISING

Candidate Name  
BLACK REPUBLICAN PAC

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.63945  
Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

665.00

**C.** 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 FUNDRAISING

Candidate Name  
BLACK REPUBLICAN PAC

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.63946  
Date of Disbursement

11 / 20 / 2008

Amount of Each Disbursement this Period

4465.10

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

9188.80

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CONTACT SERVICES, LLC	Transaction ID: SB21B.63947 Date of Disbursement
	Mailing Address 610 W CAMPBELL ST	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City ALPENA State MI Zip Code 49707	Amount of Each Disbursement this Period
	Purpose of Disbursement POLLING	<input type="text" value="1150.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="005"/> 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.63953 Date of Disbursement
	Mailing Address PO BOX 96613	<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20090	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING - EXECUTIVE DIRECTOR	<input type="text" value="2000.00"/>
	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) MR EDWARD J COUSAR	Transaction ID: SB21B.63954 Date of Disbursement
	Mailing Address PO BOX 96613	<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20090	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING - EXECUTIVE DIRECTOR	<input type="text" value="3500.00"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6650.00"/>
<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)

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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) CPAC	Transaction ID: SB21B.63949 Date of Disbursement
	Mailing Address 1007 CAMERON ST	<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2008"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement CONFERENCE	<input type="text" value="3600.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="007"/> 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.63955 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement SERVICE CHARGE	<input type="text" value="644.31"/>
	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.63956 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement AMEX DISCOUNT FEE	<input type="text" value="159.12"/>
	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="4403.43"/>
<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)  
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.63957  
Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

6661.36

B.

Full Name (Last, First, Middle Initial)  
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.63958  
Date of Disbursement

10 / 30 / 2008

Amount of Each Disbursement this Period

5904.88

C.

Full Name (Last, First, Middle Initial)  
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.63959  
Date of Disbursement

11 / 06 / 2008

Amount of Each Disbursement this Period

7249.24

SUBTOTAL of Disbursements This Page (optional) ▶

19815.48

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.

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

Transaction ID: SB21B.63960  
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

10 / 24 / 2008

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

10164.17

Purpose of Disbursement  
LIST RENTALS

003  
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)  
LEGACY LISTS INC

Transaction ID: SB21B.63961  
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

11 / 06 / 2008

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

6247.54

Purpose of Disbursement  
LIST RENTALS

003  
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)  
LEGACY LISTS INC

Transaction ID: SB21B.63962  
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

11 / 13 / 2008

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

3325.77

Purpose of Disbursement  
LIST RENTALS

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) ▶

19737.48

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)  
LEGACY LISTS INC

Transaction ID: SB21B.63963  
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW  
SUITE 410

MM / DD / YYYY  
11 / 13 / 2008

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement  
LIST RENTALS

003  
Category/  
Type

1334.58

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)  
MACKENZIE & COMPANYY

Transaction ID: SB21B.63964  
Date of Disbursement

Mailing Address 3464 S UTAH ST

MM / DD / YYYY  
10 / 24 / 2008

City ARLINGTON State VA Zip Code 22206

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONSULTING - COMPLIANCE

001  
Category/  
Type

750.00

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)  
MACKENZIE & COMPANYY

Transaction ID: SB21B.63965  
Date of Disbursement

Mailing Address 3464 S UTAH ST

MM / DD / YYYY  
11 / 13 / 2008

City ARLINGTON State VA Zip Code 22206

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONSULTING - COMPLIANCE

001  
Category/  
Type

1500.00

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

3584.58

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) MDI IMAGING & MAIL	Transaction ID: SB21B.63966
	Mailing Address 21721-A FILIGREE CT	Date of Disbursement 10 / 16 / 2008
	City ASHBURN State VA Zip Code 20147	Amount of Each Disbursement this Period 8252.78
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	003 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) MDI IMAGING & MAIL	Transaction ID: SB21B.63967
	Mailing Address 21721-A FILIGREE CT	Date of Disbursement 10 / 23 / 2008
	City ASHBURN State VA Zip Code 20147	Amount of Each Disbursement this Period 3199.98
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	003 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) MDI IMAGING & MAIL	Transaction ID: SB21B.63968
	Mailing Address 21721-A FILIGREE CT	Date of Disbursement 10 / 30 / 2008
	City ASHBURN State VA Zip Code 20147	Amount of Each Disbursement this Period 7088.51
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	003 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) .....	18541.27
<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

<b>A.</b> Full Name (Last, First, Middle Initial) RED CAP STRATEGY <hr/> Mailing Address PO BOX 300503 <hr/> City MINNEAPOLIS State MN Zip Code 55403 Purpose of Disbursement GET OUT THE VOTE AD 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>Transaction ID:</b> SB21B.63970 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 8
	Amount of Each Disbursement this Period 16725.00
	Category/ Type 004
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) RED CAP STRATEGY <hr/> Mailing Address PO BOX 300503 <hr/> City MINNEAPOLIS State MN Zip Code 55403 Purpose of Disbursement GET OUT THE VOTE AD 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>Transaction ID:</b> SB21B.63971 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 8
	Amount of Each Disbursement this Period 1021.76
	Category/ Type 004
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) RST MARKETING <hr/> Mailing Address 1272 CORPORATE PARK RD <hr/> City FOREST State VA Zip Code 24551 Purpose of Disbursement DIRECT MAIL FUNDRAISING 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>Transaction ID:</b> SB21B.63972 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 3642.46
	Category/ Type 003
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

21389.22

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

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

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

FOR LINE NUMBER: (check only one)

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

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)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.63973

Date of Disbursement

10 / 16 / 2008

Amount of Each Disbursement this Period

3563.27

**B.** Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.63974

Date of Disbursement

11 / 13 / 2008

Amount of Each Disbursement this Period

4175.61

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

7738.88

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

273072.56

**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)  
BLACK REPUBLICAN PAC

Transaction ID: SB23.63969

Date of Disbursement

Mailing Address PO BOX 96613

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

City WASHINGTON State DC Zip Code 20090-6613

Amount of Each Disbursement this Period

4000.00
---------

Purpose of Disbursement  
POLITICAL CONTRIBUTION

011
Category/ Type

Candidate Name  
BLACK REPUBLICAN PAC

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

4000.00
---------

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

4000.00
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**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> AVALANCHE SERVICES			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 53 MCGARRY BLVD			
City KEARNYSVILLE	State WV	ZIP Code 25430	

Outstanding Balance Beginning This Period 8086.00		<b>Transaction ID:</b> SD10.16210	
Amount Incurred This Period 0.00	Payment This Period 8086.00	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> BASE CONNECT, INC.			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address 1155 - 15TH STREET NW SUITE 410			
City WASHINGTON	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period 88879.78		<b>Transaction ID:</b> SD10.4113	
Amount Incurred This Period 6870.58	Payment This Period 28654.37	Outstanding Balance at Close of This Period 67095.99	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> CATTERTON PRINTING			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 100 POST OFFICE RD			
City WALDORF	State MD	ZIP Code 20602	

Outstanding Balance Beginning This Period 11304.00		<b>Transaction ID:</b> SD10.23907	
Amount Incurred This Period 0.00	Payment This Period 11304.00	Outstanding Balance at Close of This Period 0.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	67095.99
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) 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.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA MAILING SERVICES	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 <input type="text" value="59822.77"/>	<b>Transaction ID:</b> SD10.4119	
Amount Incurred This Period <input type="text" value="50673.50"/>	Payment This Period <input type="text" value="96839.67"/>	Outstanding Balance at Close of This Period <input type="text" value="13656.60"/>

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS	Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State ZIP Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period <input type="text" value="10650.38"/>	<b>Transaction ID:</b> SD10.4114	
Amount Incurred This Period <input type="text" value="14688.30"/>	Payment This Period <input type="text" value="10650.38"/>	Outstanding Balance at Close of This Period <input type="text" value="14688.30"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address 2519 BRITTONS HILL RD	
City State ZIP Code RICHMOND VA 23230	

Outstanding Balance Beginning This Period <input type="text" value="6489.00"/>	<b>Transaction ID:</b> SD10.4115	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6489.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="28344.90"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**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.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICE	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address 504 SHAW ROAD SUITE 206	
City State ZIP Code STERLING VA 20166	

Outstanding Balance Beginning This Period 4723.70	<b>Transaction ID: SD10.4116</b>	
Amount Incurred This Period 4465.10	Payment This Period 9188.80	Outstanding Balance at Close of This Period 0.00

<b>B.</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 0.00	<b>Transaction ID: SD10.63979</b>	
Amount Incurred This Period 3982.90	Payment This Period 0.00	Outstanding Balance at Close of This Period 3982.90

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 8421 HILLTOP RD	
City State ZIP Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 19815.48	<b>Transaction ID: SD10.16231</b>	
Amount Incurred This Period 7618.16	Payment This Period 19815.48	Outstanding Balance at Close of This Period 7618.16

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>11601.06</b>
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.</b> 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 <input type="text" value="39708.82"/>	<b>Transaction ID: SD10.4117</b>	
Amount Incurred This Period <input type="text" value="16442.55"/>	Payment This Period <input type="text" value="21072.06"/>	Outstanding Balance at Close of This Period <input type="text" value="35079.31"/>

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

Outstanding Balance Beginning This Period <input type="text" value="750.00"/>	<b>Transaction ID: SD10.4118</b>	
Amount Incurred This Period <input type="text" value="3000.00"/>	Payment This Period <input type="text" value="2250.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1500.00"/>

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor MDI IMAGING & MAIL	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 21721-A FILIGREE CT	
City State ZIP Code ASHBURN VA 20147	

Outstanding Balance Beginning This Period <input type="text" value="17896.44"/>	<b>Transaction ID: SD10.16237</b>	
Amount Incurred This Period <input type="text" value="4766.24"/>	Payment This Period <input type="text" value="18541.27"/>	Outstanding Balance at Close of This Period <input type="text" value="4121.41"/>

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="40700.72"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**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> RST MARKETING			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 1272 CORPORATE PARK RD			
City FOREST	State VA	ZIP Code 24551	

Outstanding Balance Beginning This Period <input type="text" value="3642.46"/>		<b>Transaction ID:</b> SD10.23896	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3642.46"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> THE LEGACY PROJECT INC			Nature of Debt (Purpose): CONSULTING - HIGH DOLLAR FUNDRAISING
Mailing Address 1155 - 15TH STREET NW SUITE 410			
City WASHINGTON	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period <input type="text" value="1500.00"/>		<b>Transaction ID:</b> SD10.16240	
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="1500.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> WASHINGTON INTELLIGENCE BUREAU			Nature of Debt (Purpose): MONEY PROCESSING & ESCROW SERVICES
Mailing Address 4128 PEPSI PLACE			
City CHANTILLY	State VA	ZIP Code 20151	

Outstanding Balance Beginning This Period <input type="text" value="3563.27"/>		<b>Transaction ID:</b> SD10.4121	
Amount Incurred This Period <input type="text" value="4175.61"/>	Payment This Period <input type="text" value="7738.88"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="1500.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 177 / 177
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 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		<b>Transaction ID: SD10.23902</b>	
200.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	200.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	200.00
2) <b>TOTALS</b> This Period (last page this line number only).....	149442.67
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	149442.67