

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) REPLACEMENTS LTD PAC		FEC IDENTIFICATION NUMBER <b>C</b> C00427849
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee REPLACEMENTS LTD PAC		Date M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 8
Mailing Address PO BOX 26029		Amount 3.20
City State Zip Code GREENSBORO NC 27420		<b>Transaction ID:</b> SE.4219
Purpose of Expenditure Photocopying of Voter Recommendations		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: BRAD MILLER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3.20		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	3.20
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	35.20
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Mr. Gary M Palmer Signature	Date M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 8