

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines Brave New PAC

ADDRESS (number and street) 777 S. Figueroa Street, Suite 4050 Los Angeles CA 90017

2. FEC IDENTIFICATION NUMBER C00446005 3. IS THIS REPORT NEW (N) OR AMENDED (A)

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

5. Covering Period 07 01 2008 through 09 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Devin Smith

Signature of Treasurer Electronically Filed by Devin Smith Date 10 15 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Brave New PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	8									
0.00												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="right">4762.11</td></tr></table>	4762.11										
4762.11												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="right">85670.00</td></tr></table>	85670.00	<table border="1" style="width: 100%;"><tr><td align="right">90757.44</td></tr></table>	90757.44								
85670.00												
90757.44												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="right">90432.11</td></tr></table>	90432.11	<table border="1" style="width: 100%;"><tr><td align="right">90757.44</td></tr></table>	90757.44								
90432.11												
90757.44												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="right">31260.92</td></tr></table>	31260.92	<table border="1" style="width: 100%;"><tr><td align="right">31586.25</td></tr></table>	31586.25								
31260.92												
31586.25												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="right">59171.19</td></tr></table>	59171.19	<table border="1" style="width: 100%;"><tr><td align="right">59171.19</td></tr></table>	59171.19								
59171.19												
59171.19												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="right">3087.03</td></tr></table>	3087.03										
3087.03												

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Brave New PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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	58500.00	59750.00
(i) Itemized (use Schedule A)	27170.00	31007.44
(ii) Unitemized	85670.00	90757.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	85670.00	90757.44
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	85670.00	90757.44
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	85670.00	90757.44

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	6129.92	6455.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6129.92	6455.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	25131.00	25131.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	31260.92	31586.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31260.92	31586.25

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	85670.00	90757.44
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	85670.00	90757.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6129.92	6455.25
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6129.92	6455.25

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 30
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Brave New PAC

A.

Full Name (Last, First, Middle Initial)
Jessica Bauman

Mailing Address 480 14th St.

City State Zip Code
Brooklyn NY 11215

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

Name of Employer Self-Employed
Occupation Theatre Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2008

Transaction ID: C411

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
John Cunningham

Mailing Address 11313 SW 109 Road, Apt . D

City State Zip Code
Miami FL 33176

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

Name of Employer Information Requested
Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 23 / 2008

Transaction ID: C546

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Laurie David

Mailing Address 11812 San Vicente Blvd., 4th Fl.

City State Zip Code
Los Angeles CA 90049

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

Name of Employer Self-Employed
Occupation Producer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2008

Transaction ID: C99

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ▶ **3300.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 30

(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)
Brave New PAC

A.

Full Name (Last, First, Middle Initial)
Alex Flanagan
Mailing Address 15010 York Rd.

City State Zip Code
Sparks MD 21152

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: C351

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Stephanie Fleck
Mailing Address 39 White Oak Road

City State Zip Code
Waban MA 02468

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

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

Transaction ID: C638

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Sara Foszcz
Mailing Address 7301 W. Burgett Rd.

City State Zip Code
Richmond IL 60071

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

Name of Employer Not-Employed Occupation Not-Employed

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

Date of Receipt

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

Transaction ID: C174

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶

2000.00

TOTAL This Period (last page this line 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 8 / 30
	<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)
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Maureen Gallagher		Date of Receipt
	Mailing Address 6513 Basswood Drive		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Troy	MI	48098
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Neace Lukens		Occupation Insurance Agent	Transaction ID: C234
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

B.	Full Name (Last, First, Middle Initial) Debrin Goubert		Date of Receipt
	Mailing Address 306 Quaker Road		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Sewickley	PA	15143
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Information Requested		Occupation Information Requested	Transaction ID: C434
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="300.00"/>

C.	Full Name (Last, First, Middle Initial) Michael Hunter		Date of Receipt
	Mailing Address 3555 Timmons Lane, #800		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Houston	TX	77027
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self Employed		Occupation Acupuncturist	Transaction ID: C101
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5800.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 30
	<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)
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Rachel Hunter		Date of Receipt
	Mailing Address 3555 Timmons Lane, #800		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 05 / 2008
	City	State	Zip Code
	Houston	TX	77027
	FEC ID number of contributing federal political committee. C		Transaction ID: C100
Name of Employer Not Employed		Occupation Not Employed	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"/> 5000.00

B.	Full Name (Last, First, Middle Initial) Malcolm Jenkins		Date of Receipt
	Mailing Address 1105 River Street East		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 26 / 2008
	City	State	Zip Code
	Prince Albert	SK	S6V0B
	FEC ID number of contributing federal political committee. C		Transaction ID: C612
Name of Employer Information Requested		Occupation Information Requested	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"/> 1000.00

C.	Full Name (Last, First, Middle Initial) Nick Kazan		Date of Receipt
	Mailing Address 3014 Third St.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 14 / 2008
	City	State	Zip Code
	Santa Monica	CA	90405
	FEC ID number of contributing federal political committee. C		Transaction ID: C458
Name of Employer Kazanoglous Corp.		Occupation Writer	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"/> 500.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 6500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Brave New PAC

A. Full Name (Last, First, Middle Initial)
Peter Kosa

Mailing Address 488 Spruce St

City Berkeley State CA Zip Code 94708

FEC ID number of contributing federal political committee. C

Name of Employer Bayer Health Care Occupation Business Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 14 / 2008

Transaction ID: C444

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Joann Loehr

Mailing Address 1751 Tyler St.

City Port Townsend State WA Zip Code 98368

FEC ID number of contributing federal political committee. C

Name of Employer Not-Employed Occupation Not-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 26 / 2008

Transaction ID: C632

Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Frances Miller

Mailing Address 221 Birch Run Road

City Chestertown State MD Zip Code 21620

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Writer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 27 / 2008

Transaction ID: C126

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 30
(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)
Brave New PAC

A.

Full Name (Last, First, Middle Initial)
David Mills

Mailing Address 1230 Richard Pl

City State Zip Code
Glendale CA 91206

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

Name of Employer
Self-Employed

Occupation
Screen Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: C507

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Josie Newhouse

Mailing Address 7670 Jasmine Court

City State Zip Code
west palm beach FL 33412

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

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2008

Transaction ID: C415

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Linda Pritzker

Mailing Address 3155 Timmons Lane, #800

City State Zip Code
Houston TX 77027

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

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2008

Transaction ID: C102

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **6250.00**

TOTAL This Period (last page this line number 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 / 30
(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)
Brave New PAC

A.

Full Name (Last, First, Middle Initial)
Roland Pritzker

Mailing Address 3155 Timmons Lane, #800

City State Zip Code
Houston TX 77027

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2008

Transaction ID: C104

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
Rose Pritzker

Mailing Address 3155 Timmons Lane, #800

City State Zip Code
Houston TX 77027

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

Name of Employer Self Employed Occupation Photographer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2008

Transaction ID: C103

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
John Quigley

Mailing Address 22 Chambers Street

City State Zip Code
Princeton NJ 08542

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
09 / 25 / 2008

Transaction ID: C603

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **10400.00**

TOTAL This Period (last page this line number 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 / 30
(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)
Brave New PAC

A.

Full Name (Last, First, Middle Initial)
Sandra Radoff

Mailing Address 4481 Douglas Avenue

City State Zip Code
Bronx NY 10471

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation
Marketing Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
0 9 / 1 5 / 2 0 0 8

Transaction ID: C499

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Scott Renschler

Mailing Address 2318 N. 52nd St.

City State Zip Code
Seattle WA 98103

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation
Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 8

Transaction ID: C459

Amount of Each Receipt this Period 500.00

C.

Full Name (Last, First, Middle Initial)
Francene Rodgers

Mailing Address 100 Belvidere St.

City State Zip Code
Boston MA 2199

FEC ID number of contributing federal political committee. C

Name of Employer Work Family Directions Occupation
Chairwoman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: C162

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) 6000.00

TOTAL This Period (last page this line number 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 / 30
(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)
Brave New PAC

A.

Full Name (Last, First, Middle Initial)
Felicia Rosenfeld

Mailing Address 175 N. Tigertail Road

City State Zip Code
Los Angeles CA 90049

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

Name of Employer Self-Employed Occupation
Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2008

Transaction ID: C406

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Thomas Rowe

Mailing Address 3944 NE Alameda St.

City State Zip Code
Portland OR 97212

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

Name of Employer Retired Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: C477

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Vincent J. Ryan

Mailing Address 745 Atlantic Ave., 11th Floor

City State Zip Code
Boston MA 02111

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

Name of Employer Schoorer Capital Corp Occupation
Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2008

Transaction ID: C117

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

TOTAL This Period (last page this line 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 15 / 30
	<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)
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Judith Sapp		Date of Receipt MM / DD / YYYY 08 / 07 / 2008
	Mailing Address 111 West Street		Transaction ID: C156
	City Portland	State ME	Zip Code 4102
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Komondorok LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Natalie Schmitt		Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 1274 Lexington		Transaction ID: C318
	City Chicago	State IL	Zip Code 60607
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Marlene Share		Date of Receipt MM / DD / YYYY 09 / 06 / 2008
	Mailing Address 14630 Dickens St., Unit 310		Transaction ID: C112
	City Sherman Oaks	State CA	Zip Code 91403
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer UBS Financial Services In- c.	Occupation Vice President - Investments	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 30
(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)
Brave New PAC

A. Full Name (Last, First, Middle Initial)
Stephen M. Silberstein
 Mailing Address 29 Eucalyptus Rd.
 City State Zip Code
Belvedere CA 94920-2435
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2008
Transaction ID: C120
 Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Sheila Smith
 Mailing Address 2800 North Lake Shore Drive, #4107
 City State Zip Code
Chicago IL 60657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Information Requested Information Requested
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2008
Transaction ID: C190
 Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Karl Wright
 Mailing Address 2 Woodbridge Court
 City State Zip Code
Rocky Point NY 11778
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
Kaplan Test Préparation Teacher
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2008
Transaction ID: C686
 Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **6250.00**

TOTAL This Period (last page this line number 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 / 30
(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)
Brave New PAC

A. Full Name (Last, First, Middle Initial)
Michael Yannell

Mailing Address 2911 N. Racine Ave.

City State Zip Code
Chicago IL 60657

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

Name of Employer Occupation
RUSH University Medical Center Pharmacist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 12 / 2008

Transaction ID: C123

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Peg Yorkin

Mailing Address 433 S. Beverly Dr.

City State Zip Code
Beverly Hills CA 90212

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

Name of Employer Occupation
Self Employed Philanthropist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 11 / 2008

Transaction ID: C121

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Richard Zitrin

Mailing Address 333 Green Street

City State Zip Code
San Francisco CA 94133

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

Name of Employer Occupation
Zitrin & Frassetto LLP Lawyer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 30 / 2008

Transaction ID: C700

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 3000.00

TOTAL This Period (last page this line number 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 / 30	
	(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"/> 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)
Brave New PAC

A.

Full Name (Last, First, Middle Initial) James Zuehl		Date of Receipt	
Mailing Address 2106 Elmwood Avenue		M M / D D / Y Y Y Y 09 / 15 / 2008	
City Wilmette	State IL	Zip Code 60091	Transaction ID: C468
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer Franczek-Sullivan	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	58500.00

**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)

PAGE 19 / 30

<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)
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D24 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="07"/> <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="35.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D25 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="08"/> <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="35.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Bankcard USA	Transaction ID: D30 Date of Disbursement
	Mailing Address 5701 Lindero Road, Bldg. #3	<input type="text" value="08"/> <input type="text" value="12"/> / <input type="text" value="2008"/>
	City Westlake Village State CA Zip Code 91362	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Charges Candidate Name	<input type="text" value="2.80"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="72.80"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 30

<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)
Brave New PAC

A.	Full Name (Last, First, Middle Initial) Bankcard USA Mailing Address 5701 Lindero Road, Bldg. #3 City Westlake Village State CA Zip Code 91362 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D23 Date of Disbursement 08 / 12 / 2008 Amount of Each Disbursement this Period 1.87 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Bankcard USA Mailing Address 5701 Lindero Road, Bldg. #3 City Westlake Village State CA Zip Code 91362 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D27 Date of Disbursement 08 / 19 / 2008 Amount of Each Disbursement this Period 0.58 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Bankcard USA Mailing Address 5701 Lindero Road, Bldg. #3 City Westlake Village State CA Zip Code 91362 Purpose of Disbursement Bank Charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D28 Date of Disbursement 08 / 28 / 2008 Amount of Each Disbursement this Period 0.47 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

2.92

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Brave New PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D26 Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="03"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="37.73"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D19 Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="24.47"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D21 Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="0.70"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="62.90"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 22 / 30

<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)
Brave New PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D20 Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 2.33</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D22 Date of Disbursement 09 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 116.50</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D29 Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 2.33</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

121.16

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 23 / 30

<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)
Brave New PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D39 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 125.58</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D38 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 29.71</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D40 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 120.70</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

275.99

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)
Brave New PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D45 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 51.37</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D43 Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 84.11</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D44 Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 58.61</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

194.09

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 25 / 30

<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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Brave New PAC

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<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D31 Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="23"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4.66"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D41 Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="23"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1.75"/></p>

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Brave New PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: D36 Date of Disbursement 09 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 9.32</p> <p>001 Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: D35 Date of Disbursement 09 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 18.87</p> <p>001 Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Transaction ID: D33 Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 16.55</p> <p>001 Category/Type</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>

SUBTOTAL of Disbursements This Page (optional) ▶

44.74

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)
Brave New PAC

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<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D37 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <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="7.38"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bankcard USA</p> <p>Mailing Address 5701 Lindero Road, Bldg. #3</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Bank Charges Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D32 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <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="13.84"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="105.92"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 30

<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)
Brave New PAC

A.

Full Name (Last, First, Middle Initial)
Buying Time, LLC

Transaction ID: D46

Date of Disbursement

Mailing Address 2715 M St. NW, Ste. 400

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	8

City Washington State DC Zip Code 20007

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Media Buy

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

5899.02

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)
Brave New PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Downing LLP			Nature of Debt (Purpose): Legal & Treasury Expense
Mailing Address 777 S. Figueroa St., Ste. 4050			
City Los Angeles	State CA	ZIP Code 90017	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: D50	
Amount Incurred This Period <input type="text" value="87.03"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="87.03"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Kaufman Downing LLP			Nature of Debt (Purpose): Legal & Treasury Fees
Mailing Address 777 S. Figueroa St., Ste. 4050			
City Los Angeles	State CA	ZIP Code 90017	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: D49	
Amount Incurred This Period <input type="text" value="3000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3000.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="3087.03"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="3087.03"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="3087.03"/>

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Brave New PAC		FEC IDENTIFICATION NUMBER C C00446005	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		Date M M / D D / Y Y Y Y 09 / 12 / 2008	
Full Name (Last, First, Middle, Initial) of Payee Buying Time, LLC		Amount 25131.00	
Mailing Address 2715 M St. NW, Ste. 400 Washington, DC 20007		Transaction ID: D47	
City Washington	State DC	Zip Code 20007	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential
Purpose of Expenditure Radio/Television Media		Category/ Type	004
Name of Federal Candidate supported or Opposed by expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
		25131.00	

(a) SUBTOTAL of Itemized Independent Expenditures	25131.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	25131.00
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.	
Devin Smith Signature	Date M M / D D / Y Y Y Y 10 / 15 / 2008