

**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

Republican Mainstreet Partnership PAC

ADDRESS (number and street)

c/o G&amp;W 2201 Wisconsin Ave., NW

Suite 320

☐Check if different  
than previously  
reported. (ACC)

Washington

DC

20007

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00165159

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

09

01

2010

through

09

30

2010

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

Sarah Chamberlain Resnick

Signature of Treasurer

Electronically Filed by Sarah Chamberlain Resnick

Date

10

06

2010

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**FEC FORM 3X**  
(Rev. 12/2004)

A. Form/Schedule : **F3XN**  
Transaction ID :

Memorandum Please be advised that all expenditures on Schedule B, Line 21(b) are to support Committee activities and are not made on behalf of specifically identified candidates. Also, all expenditures on Schedule B, Line 21(b) are to support Committee activities and are not for public communications and voter drive activity containing express advocacy.

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
Republican Mainstreet Partnership PAC

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	100293.39
(b) Cash on Hand at Beginning of Reporting Period .....	213046.76	
(c) Total Receipts (from Line 19) .....	43805.81	476935.55
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	256852.57	577228.94
7. Total Disbursements (from Line 31) .....	84895.35	405271.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	171957.22	171957.22
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	2010.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	1890.00	

☐ 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)

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Write or Type Committee Name

Republican Mainstreet Partnership PAC

Report Covering the Period:

From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	19150.00	46575.00
(ii) Unitemized .....	635.00	3170.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	19785.00	49745.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	24000.00	427000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	43785.00	476745.00
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.) .....	20.81	190.55
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)) .....	43805.81	476935.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	43805.81	476935.55

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

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.....	17395.35	166271.72	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	17395.35	166271.72	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	67500.00	239000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	84895.35	405271.72	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	84895.35	405271.72	

**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) .....	43785.00	476745.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	43785.00	476745.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17395.35	166271.72
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17395.35	166271.72

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

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

FOR LINE NUMBER: PAGE 7 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Rody Biggert

Mailing Address 425 E 6th Street

City

Hinsdale

State

IL

Zip Code

60521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

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

Transaction ID: SA11AI.11100

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Paul Bleiberg

Mailing Address 2401 Calvert Street, NW  
Apt. 321

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

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 / 0 8 / 2 0 1 0

Transaction ID: SA11AI.11097

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Edward M Condit, Jr.

Mailing Address 94 Sunset Road

City

Weston

State

MA

Zip Code

02493-1637

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rackemann, Sawyer & Brewster

Occupation  
Attorney

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 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.11111

Amount of Each Receipt this Period

250.00

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

1250.00

**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)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Robert T. Gannett

Mailing Address 619 Pleasant Valley Road

City

Brattleboro

State

VT

Zip Code

05301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: SA11AI.11104

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Robert T. Gannett

Mailing Address 619 Pleasant Valley Road

City

Brattleboro

State

VT

Zip Code

05301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.11124

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Gurnee Hart

Mailing Address 133 E 64th Street

City

New York

State

NY

Zip Code

10065-7045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.11116

Amount of Each Receipt this Period

300.00

**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)  
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FOR LINE NUMBER: PAGE 9 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Henry Hillman

Mailing Address 5120 Holyrood Road

City

Pittsburgh

State

PA

Zip Code

15213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Hillman Company

Occupation  
Executive

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 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.11120

Amount of Each Receipt this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Nancy L. Johnson

Mailing Address 141 S. Mountain Drive

City

New Britain

State

CT

Zip Code

06052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baker Donelson

Occupation  
Senior Public Policy Advisor

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 1 / 2 0 1 0

Transaction ID: SA11AI.11106

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Margot Keith

Mailing Address 975 Garrett Mill Road

City

Newtown Square

State

PA

Zip Code

19073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.11206

Amount of Each Receipt this Period

500.00

**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)  
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FOR LINE NUMBER: PAGE 10 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Robert Keith

Mailing Address 975 Garrett Mill Road

City

Newtown Square

State

PA

Zip Code

19073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TL Ventures

Occupation

Venture Capitalist

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 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.11122

Amount of Each Receipt this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Lawrence

Mailing Address 24 Jackson Pond Road

City

Dedham

State

MA

Zip Code

02026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

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 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.11126

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

John D. Mabie

Mailing Address 36 Indian Hill Road

City

Winnetka

State

IL

Zip Code

60093

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid-Continent Capital

Occupation

Chairman

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 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.11107

Amount of Each Receipt this Period

1000.00

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

3500.00

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

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

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FOR LINE NUMBER: PAGE 11 / 34

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Peter L. Malkin

Mailing Address 60 East 42nd Street

City

New York

State

NY

Zip Code

10165

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wien & Malkin LLC

Occupation

Real Estate/Law

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 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.11123

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Florence Wheeler

Mailing Address 10 North Mayflower Road

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

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 / 3 0 / 2 0 1 0

Transaction ID: SA11AI.11112

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Ziff

Mailing Address 350 Park Avenue  
11th Floor

City

New York

State

NY

Zip Code

10022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ziff Brothers Investments

Occupation

Investment Banker

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 / 2 1 / 2 0 1 0

Transaction ID: SA11AI.11109

Amount of Each Receipt this Period

5000.00

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

6100.00

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

19150.00

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

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FOR LINE NUMBER: PAGE 12 / 34

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

ACSPA-Surgeons PAC

Mailing Address 1640 Wisconsin Avenue, NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

**C**

C00382424

Name of Employer

Occupation

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 / 0 9 / 2 0 1 0

Transaction ID: SA11C.11129

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

American Road & Transportation Builders Assn PAC (ARTBA\*PAC)

Mailing Address 1219 28th Street, NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

**C**

C00118208

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  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11C.11137

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

AMGEN Political Action Committee

Mailing Address One Amgen Center Drive

City

Thousand Oaks

State

CA

Zip Code

91320

FEC ID number of contributing  
federal political committee.

**C**

C00251876

Name of Employer

Occupation

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 / 2 8 / 2 0 1 0

Transaction ID: SA11C.11134

Amount of Each Receipt this Period

5000.00

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

6500.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 34

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Applied Materials, Inc. Political Action Committee

Mailing Address 20 Park Road, Suite E

City

Burlingame

State

CA

Zip Code

94010

FEC ID number of contributing  
federal political committee.

**C**

C00406892

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11C.11139

Amount of Each Receipt this Period

3000.00

**B.**

Full Name (Last, First, Middle Initial)

ASTRO - PAC

Mailing Address 8280 Willow Oaks Corporate Drive  
Suite 500

City

Fairfax

State

VA

Zip Code

22031

FEC ID number of contributing  
federal political committee.

**C**

C00384602

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: SA11C.11130

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

BNSF RailPac

Mailing Address PO Box 961039

City

Fort Worth

State

TX

Zip Code

76161-0039

FEC ID number of contributing  
federal political committee.

**C**

C00235739

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11C.11140

Amount of Each Receipt this Period

5000.00

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

10500.00

**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 / 34

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)  
Independent Community Bankers PAC

Mailing Address 1615 L Street, NW  
Suite 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00032698

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 1 0

Transaction ID: SA11C.11133

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Independent Community Bankers PAC

Mailing Address 1615 L Street, NW  
Suite 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00032698

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 1 0

Transaction ID: SA11C.11136

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
PG&E Corporation Energy PAC

Mailing Address 77 Beale Street  
PO Box 770000 B29H

City State Zip Code  
San Francisco CA 94177

FEC ID number of contributing  
federal political committee.

**C** C00177469

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: SA11C.11131

Amount of Each Receipt this Period

2000.00

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

7000.00

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

24000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 / 34

<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)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

American Express

Mailing Address PO Box 1270

City  
NewarkState  
NJZip Code  
07101-1270Purpose of Disbursement  
See Memo Entry

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.11149

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	0

Amount of Each Disbursement this Period

2673.47

**B.**

Full Name (Last, First, Middle Initial)

United Airlines, Inc.

Mailing Address 77 W Wacker Drive

City  
ChicagoState  
ILZip Code  
60601Purpose of Disbursement  
Airline Tickets

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.11149.0

Date of Disbursement

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

Amount of Each Disbursement this Period

410.02

**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

United Airlines, Inc.

Mailing Address 77 W Wacker Drive

City  
ChicagoState  
ILZip Code  
60601Purpose of Disbursement  
Airline Tickets

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.11149.1

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	7		2	0	1	0

Amount of Each Disbursement this Period

954.80

**[MEMO ITEM]**

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

2673.47

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 16 / 34

<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)  
Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Tortilla Coast

Mailing Address 400 First Street, SE

City Washington State DC Zip Code 20016

Purpose of Disbursement  
Facilities/Catering

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.11149.2

Date of Disbursement

09 / 23 / 2010

Amount of Each Disbursement this Period

1236.37

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)

Vendors Under \$200

Mailing Address 1220 L Street, NW  
Suite 100-263

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Travel

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.11149.3

Date of Disbursement

09 / 28 / 2010

Amount of Each Disbursement this Period

12.28

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)

Orbitz

Mailing Address 500 West Madison Street  
Suite 1000

City Chicago State IL Zip Code 60661

Purpose of Disbursement  
Airline Tickets

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.11149.4

Date of Disbursement

09 / 21 / 2010

Amount of Each Disbursement this Period

60.00

**[MEMO ITEM]**

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

0.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 17 / 34

<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)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Sarah Chamberlain Resnick

Mailing Address 11431 James Jack Lane

City  
CharlotteState  
NCZip Code  
28277Purpose of Disbursement  
Fundraising Consultant

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.11142

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

Chase Card Services

Mailing Address PO Box 15153

City  
WilmingtonState  
DEZip Code  
19886-5153Purpose of Disbursement  
See Memo Entry

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.11145

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

Amount of Each Disbursement this Period

2490.77

**C.**

Full Name (Last, First, Middle Initial)

Capitol Hill Club

Mailing Address 300 First Street, SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Facilities/Catering

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.11145.0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

Amount of Each Disbursement this Period

2490.77

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional) .....

7490.77

**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 18 / 34

<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)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Checks In The Mail

Mailing Address PO Box 351130

City  
New Braunfels

State  
TX

Zip Code  
78135

Purpose of Disbursement  
Office Supplies

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.11147

Date of Disbursement

/   /

Amount of Each Disbursement this Period

101.16

**B.**

Full Name (Last, First, Middle Initial)

Gilbert & Wolfand, PC

Mailing Address 2201 Wisconsin Avenue, NW  
Suite 320

City  
Washington

State  
DC

Zip Code  
20007

Purpose of Disbursement  
Accounting Services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.11143

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2115.00

**C.**

Full Name (Last, First, Middle Initial)

Suntrust Bank

Mailing Address PO Box 85024

City  
Richmond

State  
VA

Zip Code  
23285-5024

Purpose of Disbursement  
Bank Service Charges

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.11155

Date of Disbursement

/   /

Amount of Each Disbursement this Period

14.95

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

2231.11

**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 19 / 34

<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)

Republican Mainstreet Partnership PAC

A.

Full Name (Last, First, Middle Initial)

The Word Doctors LLC

Mailing Address PO Box 43

City  
Manassas

State  
VA

Zip Code  
20108

Purpose of Disbursement  
Keynote Speaker

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.11144

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

5000.00

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

17395.35

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 / 34

<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)

Republican Mainstreet Partnership PAC

**A.** Full Name (Last, First, Middle Initial)  
Bartlett for Congress Committee

Mailing Address P.O. Box 245

City Middletown State MD Zip Code 21769

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 06

Transaction ID: SB23.11156

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
Chris Lee for Congress

Mailing Address PO Box 15395

City Rochester State NY Zip Code 14615

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 26

Transaction ID: SB23.11164

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
Dave Camp For Congress 2010Mailing Address 5915 Eastman Avenue  
Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: SB23.11181

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

Amount of Each Disbursement this Period

4000.00

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

6000.00

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 21 / 34

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 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)  
Republican Mainstreet Partnership PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Djou for Hawaii	<b>Transaction ID:</b> SB23.11160 <b>Date of Disbursement</b>
Mailing Address PO Box 235280	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Honolulu State HI Zip Code 96823	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Contribution Candidate Name	<div> <div>1000.00</div> <div>Category/Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Djou for Hawaii	<b>Transaction ID:</b> SB23.11185 <b>Date of Disbursement</b>
Mailing Address PO Box 235280	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Honolulu State HI Zip Code 96823	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Contribution Candidate Name	<div> <div>1000.00</div> <div>Category/Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Dold For Congress	<b>Transaction ID:</b> SB23.11177 <b>Date of Disbursement</b>
Mailing Address PO Box 8145	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Northfield State IL Zip Code 60093	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Contribution Candidate Name	<div> <div>2500.00</div> <div>Category/Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 10	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**4500.00**

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 22 / 34

<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)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Fitzpatrick For Congress

Mailing Address PO Box 185

City  
LanghorneState  
PAZip Code  
19047Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 08

Transaction ID: SB23.11189

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Frelinghuysen For Congress

Mailing Address 19 Cattano Avenue

City  
MorristownState  
NJZip Code  
07960Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 11

Transaction ID: SB23.11161

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Friends of Erik Paulsen

Mailing Address P.O. Box 44369  
250 Prairie Center DriveCity  
Eden PrairieState  
MNZip Code  
55344Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 03

Transaction ID: SB23.11168

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00

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

4500.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
 Republican Mainstreet Partnership PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Joe Heck	<b>Transaction ID:</b> SB23.11190 <b>Date of Disbursement</b>
Mailing Address PO Box 750114	<div> <div> <div>M</div> <div>M</div> </div> <div>/</div> <div> <div>D</div> <div>D</div> </div> <div>/</div> <div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div> </div> <div> <div>0</div> <div>9</div> </div> <div> <div>1</div> <div>5</div> </div> <div> <div>2</div> <div>0</div> <div>1</div> <div>0</div> </div>

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

7500.00

**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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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

A.

Full Name (Last, First, Middle Initial)

Gerlach for Congress

Mailing Address PO Box 87

City  
Uwchland

State  
PA

Zip Code  
19480

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 06

Transaction ID: SB23.11162

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Jim Renacci for Congress

Mailing Address 150 Smokerise Drive

City  
Wadsworth

State  
OH

Zip Code  
44281

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 16

Transaction ID: SB23.11192

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

Jon Runyan for Congress

Mailing Address PO Box 225

City  
Colonia

State  
NJ

Zip Code  
07067

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 03

Transaction ID: SB23.11195

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

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

6000.00

**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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

A.

Full Name (Last, First, Middle Initial)

Joseph Cao For Congress

Mailing Address PO Box 56156

City  
New Orleans

State  
LA

Zip Code  
70156

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: LA District: 02

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.11159

Date of Disbursement

/   /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)

Judy Biggert for Congress

Mailing Address PO Box 637

City  
Hinsdale

State  
IL

Zip Code  
60522

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 13

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.11157

Date of Disbursement

/   /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Judy Biggert for Congress

Mailing Address PO Box 637

City  
Hinsdale

State  
IL

Zip Code  
60522

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 13

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.11183

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**2500.00**

**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

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(check only one)

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NAME OF COMMITTEE (In Full)  
 Republican Mainstreet Partnership PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Lance for Congress	<b>Transaction ID:</b> SB23.11163 <b>Date of Disbursement</b>
Mailing Address PO Box 225	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Colonia State NJ Zip Code 07067	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Contribution Candidate Name	<div> <div>500.00</div> <div>Category/Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) LaTourette for Congress Committee	<b>Transaction ID:</b> SB23.11180 <b>Date of Disbursement</b>
Mailing Address 320 Kenarden Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Highland Hts State OH Zip Code 44143	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Contribution Candidate Name	<div> <div>1500.00</div> <div>Category/Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Lee Terry For Congress	<b>Transaction ID:</b> SB23.11170 <b>Date of Disbursement</b>
Mailing Address PO Box 540098	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Omaha State NE Zip Code 68154	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Contribution Candidate Name	<div> <div>1000.00</div> <div>Category/Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 02	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**3000.00**

**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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NAME OF COMMITTEE (In Full)  
 Republican Mainstreet Partnership PAC

<b>A.</b> Full Name (Last, First, Middle Initial) LoBiondo For Congress Mailing Address P.O. Box 550	<b>Transaction ID:</b> SB23.11165 <b>Date of Disbursement</b> <div> <div>09</div> <div>15</div> <div>2010</div> </div>
City Vineland State NJ Zip Code 08362 Purpose of Disbursement Candidate Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>1000.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) Lynn Jenkins for Congress Mailing Address PO Box 1441 City Topeka State KS Zip Code 66601 Purpose of Disbursement Candidate Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 02 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.11186 <b>Date of Disbursement</b> <div> <div>09</div> <div>15</div> <div>2010</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2500.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) Mary Bono Mack Committee Mailing Address PO Box 3370 City Palm Springs State CA Zip Code 92263 Purpose of Disbursement Candidate Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.11184 <b>Date of Disbursement</b> <div> <div>09</div> <div>15</div> <div>2010</div> </div> <b>Amount of Each Disbursement this Period</b> <div>3500.00</div>

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

**7000.00**

**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 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)  
Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)  
Mike Kelly for Congress

Mailing Address PO Box 476

City Lyndora State PA Zip Code 16045

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 03

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.11200

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Pat Meehan for Congress

Mailing Address PO Box 308  
1051 Pontiac Road

City Drexel Hill State PA Zip Code 19026

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: PA District: 07

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.11191

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Steve Austria for Congress

Mailing Address 20 South Limestone Street  
Suite 390

City Springfield State OH Zip Code 45502

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OH District: 07

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.11158

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

4500.00

**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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Stivers for Congress	<b>Transaction ID:</b> SB23.11194 <b>Date of Disbursement</b>
Mailing Address 81 S Fifth Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Columbus State OH Zip Code 43215	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Contribution Candidate Name	<div> <div>2500.00</div> <div>Category/Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Texans for Senator John Cornyn , Inc.	<b>Transaction ID:</b> SB23.11176 <b>Date of Disbursement</b>
Mailing Address 6850 Austin Center Blvd Suite 180	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Austin State TX Zip Code 78731	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Contribution Candidate Name	<div> <div>5000.00</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Tim Murphy for Congress	<b>Transaction ID:</b> SB23.11166 <b>Date of Disbursement</b>
Mailing Address PO Box 24551	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 1 5 / 2 0 1 0</div> </div>
City Pittsburgh State PA Zip Code 15234	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Candidate Contribution Candidate Name	<div> <div>1000.00</div> <div>Category/Type</div> </div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**8500.00**

**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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.**

Full Name (Last, First, Middle Initial)

Tom Ganley for Congress

Mailing Address PO Box 41331

City  
Brecksville

State  
OH

Zip Code  
44141

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 13

**Transaction ID:** SB23.11196

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

Tom Reed for Congress

Mailing Address 99 W 1st Street

City  
Corning

State  
NY

Zip Code  
14830

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 29

**Transaction ID:** SB23.11174

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Upton for All of US

Mailing Address PO Box 490  
402 State Street

City  
St. Joseph

State  
MI

Zip Code  
49085

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 06

**Transaction ID:** SB23.11171

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

8500.00

**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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
Republican Mainstreet Partnership PAC

A.

Full Name (Last, First, Middle Initial)  
Upton for All of US

Mailing Address PO Box 490  
402 State Street

City State Zip Code  
St. Joseph MI 49085

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 06

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.11187

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)  
Walden for Congress

Mailing Address PO Box 1091

City State Zip Code  
Hood River OR 97031

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OR District: 02

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.11172

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)  
Whitfield for Congress Committee

Mailing Address P.O. BOX 391

City State Zip Code  
Hopkinsville KY 42241

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: KY District: 01

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.11173

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

2500.00

**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 32 / 34

<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)

Republican Mainstreet Partnership PAC

A.

Full Name (Last, First, Middle Initial)

Whitfield for Congress Committee

Mailing Address P.O. BOX 391

City  
Hopkinsville

State  
KY

Zip Code  
42241

Purpose of Disbursement  
Candidate Contribution

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: KY District: 01

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.11188

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

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

2500.00

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

67500.00



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 33 / 34

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Johnson for Congress

Nature of Debt (Purpose):  
Refund of Excess Contribu-  
tion

Mailing Address PO Box 1986

City	State	ZIP Code
New Britain	CT	06050

Outstanding Balance Beginning This Period

2010.00

Transaction ID: SD9.8523

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2010.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

2010.00

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

2010.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

2010.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 34 / 34

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Republican Mainstreet Partnership PAC

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Gilbert & Wolfand, PCNature of Debt (Purpose):  
Accounting ServicesMailing Address 2201 Wisconsin Avenue, NW  
Suite 320City State ZIP Code  
Washington DC 20007

Outstanding Balance Beginning This Period

2115.00

Transaction ID: SD10.11093

Amount Incurred This Period

0.00

Payment This Period

2115.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Gilbert & Wolfand, PCNature of Debt (Purpose):  
Accounting ServicesMailing Address 2201 Wisconsin Avenue, NW  
Suite 320City State ZIP Code  
Washington DC 20007

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.11204

Amount Incurred This Period

1890.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1890.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
The Word Doctors LLCNature of Debt (Purpose):  
Keynote Speaker

Mailing Address PO Box 43

City State ZIP Code  
Manassas VA 20108

Outstanding Balance Beginning This Period

5000.00

Transaction ID: SD10.10872

Amount Incurred This Period

0.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

1890.00

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

1890.00

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

1890.00