

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 MEMBER SENATE FUND

ADDRESS (number and street) PO BOX 96198

Check if different than previously reported. (ACC) WASHINGTON DC 20090

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00413872

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day **Post -Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 01 01 2009 through 06 30 2009

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 SCOTT B MACKENZIE

Signature of Treasurer Electronically Filed by SCOTT B MACKENZIE Date 07 31 2009

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)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
REPUBLICAN MEMBER SENATE FUND

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		66600.77
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	66600.77									
(c) Total Receipts (from Line 19)	349269.67	349269.67								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	415870.44	415870.44								
7. Total Disbursements (from Line 31)	365533.72	365533.72								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	50336.72	50336.72								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	46627.85									

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

Write or Type Committee Name
 REPUBLICAN MEMBER SENATE FUND

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	80917.00	80917.00
(ii) Unitemized	268352.67	268352.67
(iii) TOTAL (add Lines 11(a)(i) and (ii)	349269.67	349269.67
(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)	349269.67	349269.67
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))	349269.67	349269.67
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	349269.67	349269.67

DETAILED SUMMARY PAGE

of Disbursements

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.....	351391.22	351391.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	351391.22	351391.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
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.....	4142.50	4142.50
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))..	365533.72	365533.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	365533.72	365533.72

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 132

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)	349269.67	349269.67
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	349269.67	349269.67
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	351391.22	351391.22
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	351391.22	351391.22

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

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

FOR LINE NUMBER: PAGE 6 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR ROGER G ACKERMAN 148
Mailing Address 10501 NORTH RD
City CORNING State NY Zip Code 14830
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 01 / 16 / 2009
Transaction ID: SA11AI.4264
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
MR ROGER G ACKERMAN 148
Mailing Address 10501 NORTH RD
City CORNING State NY Zip Code 14830
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 02 / 23 / 2009
Transaction ID: SA11AI.4265
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
MRS ANN ALEXANDER 201
Mailing Address 2644 ATOKA RD
City MARSHALL State VA Zip Code 20115
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation ESTATE MANAGEMENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 04 / 15 / 2009
Transaction ID: SA11AI.4352
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00
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 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
DOIE ALLEN 762

Mailing Address PO BOX 351

City State Zip Code
NOCONA TX 76255

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: SA11AI.4399

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MR N D ANDERSON 770

Mailing Address 1901 MARSHALL ST

City State Zip Code
HOUSTON TX 77098

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.4523

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
MR WILSON ANDREWS 982

Mailing Address 6727 40TH ST NE

City State Zip Code
MARYSVILLE WA 98270

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4578

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MRS PATRICIA D ANGELUCCI 194
Mailing Address 200 MONTGOMERY AVE
City NORRISTOWN State PA Zip Code 19401
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.4591
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
MR THOMAS W ANGERMAN 151
Mailing Address 801 15TH ST
City OAKMONT State PA Zip Code 15139
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 02 / 17 / 2009
Transaction ID: SA11AI.4593
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
MRS VIRGINIA M ARCHER 847
Mailing Address 1620 WINDSWEPT DR
City SAINT GEORGE State UT Zip Code 84790
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 29 / 2009
Transaction ID: SA11AI.4642
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 650.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MRS VIRGINIA M ARCHER 847

Mailing Address 1620 WINDSWEPT DR

City State Zip Code
SAINT GEORGE UT 84790

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: MM / DD / YYYY
06 / 22 / 2009

Transaction ID: SA11AI.4643

Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
BERNARD D ASCENZO 190

Mailing Address 803 SHADELAND AVE

City State Zip Code
DREXEL HILL PA 19026

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
04 / 23 / 2009

Transaction ID: SA11AI.4701

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
MS ANNA MAY AUSTIN 329

Mailing Address 2355 S RIVER RD

City State Zip Code
MELBOURNE BEACH FL 32951

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 09 / 2009

Transaction ID: SA11AI.4748

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **520.00**

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 10 / 132
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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 MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
 MR JAMES H BAKER 617
 Mailing Address 1906 OWENS DR
 City BLOOMINGTON State IL Zip Code 61701
 Date of Receipt: MM / DD / YYYY (04 / 03 / 2009)
 Transaction ID: SA11AI.4846
 Amount of Each Receipt this Period: 100.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: NONE Occupation: RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 250.00

B. Full Name (Last, First, Middle Initial)
 MR JAMES H BAKER 617
 Mailing Address 1906 OWENS DR
 City BLOOMINGTON State IL Zip Code 61701
 Date of Receipt: MM / DD / YYYY (04 / 24 / 2009)
 Transaction ID: SA11AI.4847
 Amount of Each Receipt this Period: 100.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: NONE Occupation: RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 350.00

C. Full Name (Last, First, Middle Initial)
 MR ALLAN H BARKER 841
 Mailing Address 2690 ROXBURY CIR
 City SALT LAKE CITY State UT Zip Code 84108
 Date of Receipt: MM / DD / YYYY (02 / 09 / 2009)
 Transaction ID: SA11AI.4935
 Amount of Each Receipt this Period: 450.00
 FEC ID number of contributing federal political committee: C
 Name of Employer: NONE Occupation: RETIRED
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 450.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR ALLAN H BARKER 841

Mailing Address 2690 ROXBURY CIR

City State Zip Code
SALT LAKE CITY UT 84108

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2009

Transaction ID: SA11AI.4936

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
MR EUGENE W BECKER 610

Mailing Address 1008 S LOGAN ST APT 12

City State Zip Code
LENA IL 61048

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2009

Transaction ID: SA11AI.5176

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
MR JAMES BITNER 048

Mailing Address PO BOX 610

City State Zip Code
ROCKPORT ME 04856

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 03 / 2009

Transaction ID: SA11AI.5492

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR JAMES BITNER 048

Mailing Address PO BOX 610

City State Zip Code
ROCKPORT ME 04856

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2009

Transaction ID: SA11AI.5493

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR JAMES W BLATCHFORD 190, JR

Mailing Address 611 ANDOVER RD

City State Zip Code
NEWTOWN SQUARE PA 19073

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: SA11AI.5545

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR JONATHAN S BOONE 770

Mailing Address 4400 MEMORIAL DR APT 1231

City State Zip Code
HOUSTON TX 77007

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 07 / 2009

Transaction ID: SA11AI.5665

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 800.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR JONATHAN S BOONE 770

Mailing Address 4400 MEMORIAL DR APT 1231

City State Zip Code
HOUSTON TX 77007

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2009

Transaction ID: SA11AI.5666

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MARK E BORGERDING 563

Mailing Address PO BOX 510

City State Zip Code
BELGRADE MN 56312

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 26 / 2009

Transaction ID: SA11AI.5680

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
DR GEORGE BORST 411

Mailing Address 1201 SAINT CHRISTOPHER DR

City State Zip Code
ASHLAND KY 41101

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

Name of Employer Occupation
DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 29 / 2009

Transaction ID: SA11AI.5685

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 14 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MISS PEGGY BRAECKLEIN 752
Mailing Address 7 GLENHEATHER CT

City State Zip Code
DALLAS TX 75225

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	3	/	2	0	0	9

Transaction ID: SA11AI.5815
 Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR J DONALD BROWN 229
Mailing Address 2061 HAMPTON DR

City State Zip Code
WAYNESBORO VA 22980

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: SA11AI.6036
 Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR ALEXANDER BUCK 085
Mailing Address 44 NASSAU ST

City State Zip Code
PRINCETON NJ 08542

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

Name of Employer Occupation
SELF EMPLOYED VENTURE CAPITALIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	6	/	2	0	0	9

Transaction ID: SA11AI.6192
 Amount of Each Receipt this Period
500.00

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: PAGE 15 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MRS MARY M BUOL 193

Mailing Address 1008 DUNVEGAN RD

City State Zip Code
WEST CHESTER PA 19382

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.6249

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
MRS NONA BUTTERWORTH 079

Mailing Address 182 IRVING PL

City State Zip Code
BASKING RIDGE NJ 07920

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

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.6380

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
COLIN CAHOON 752

Mailing Address 4346 MIDDLETON RD

City State Zip Code
DALLAS TX 75229

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.6426

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

800.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR JOSEPH M CARSON 439, JR
Mailing Address 101 WALNUT AVE
City SAINT CLAIRSVILLE State OH Zip Code 43950
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 30 / 2009
Transaction ID: SA11AI.6678
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
MR HARRIS CLAY 309
Mailing Address 933 MILLEDGE RD
City AUGUSTA State GA Zip Code 30904
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 04 / 17 / 2009
Transaction ID: SA11AI.7043
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
MISS RHODA COBB 334
Mailing Address 336 E COCONUT PALM RD
City BOCA RATON State FL Zip Code 33432
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 10 / 2009
Transaction ID: SA11AI.7090
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 750.00
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 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MRS ELEANOR COBB 900

Mailing Address 131 W VISTA ST

City State Zip Code
LOS ANGELES CA 90036

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
06 / 29 / 2009

Transaction ID: SA11AI.7100

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
MR WARREN H COLEMAN 305

Mailing Address 814 LEMMON LN #7079

City State Zip Code
ELLIJAY GA 30540

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2009

Transaction ID: SA11AI.7156

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
MS ZOE COULSON 191

Mailing Address 220 LOCUST ST APT 18B

City State Zip Code
PHILADELPHIA PA 19106

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2009

Transaction ID: SA11AI.7398

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **325.00**

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

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

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

FOR LINE NUMBER: PAGE 18 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR NELSON L COX 411

Mailing Address 1617 MONTGOMERY AVE

City State Zip Code
ASHLAND KY 41101

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

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

Transaction ID: SA11AI.7439

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
T C CRAIGHEAD 734

Mailing Address 1008 ROCKFORD CT

City State Zip Code
ARDMORE OK 73401

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

Name of Employer Occupation
T C CRAIGHEAD & CO OIL AND GAS PRODUCER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.7460

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR JOHN CRAWFORD 950

Mailing Address 20128 CHATEAU DR

City State Zip Code
SARATOGA CA 95070

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

Name of Employer Occupation
INTEL CORP COMPUTER ARCHITECT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.7496

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **780.00**

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

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

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

FOR LINE NUMBER: PAGE 19 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MISS WANDA CRAWLEY 629

Mailing Address 1213 PRESTWICKE DR

City State Zip Code
HERRIN IL 62948

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.7500

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MISS WANDA CRAWLEY 629

Mailing Address 1213 PRESTWICKE DR

City State Zip Code
HERRIN IL 62948

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 285.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 8 / 2 0 0 9

Transaction ID: SA11AI.7501

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
DR ANDREW CROOK 950

Mailing Address 2600 CASTELLO WAY

City State Zip Code
SANTA CLARA CA 95051

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

Name of Employer Occupation
DOCTOR

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

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.7528

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ►

235.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 132
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) MS F LUCILLE DALEY 672		Date of Receipt MM / DD / YYYY 06 / 24 / 2009		
	Mailing Address 2056 S ESTELLE ST		Transaction ID: SA11AI.7689		
	City WICHITA	State KS	Zip Code 67211	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NONE	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

B.	Full Name (Last, First, Middle Initial) MR MICHAEL G DAMONE 483		Date of Receipt MM / DD / YYYY 05 / 13 / 2009		
	Mailing Address 3418 BLOSSOM LN		Transaction ID: SA11AI.7708		
	City BLOOMFIELD HILLS	State MI	Zip Code 48302	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer THE DAMONE GROUP	Occupation OWNER			
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) MRS LOIS M DAVIS 301		Date of Receipt MM / DD / YYYY 04 / 24 / 2009		
	Mailing Address 89 OAK MOUNTAIN TRL		Transaction ID: SA11AI.7787		
	City CARROLLTON	State GA	Zip Code 30116	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NONE	Occupation HOMEMAKER			
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)	▶	775.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 21 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR MYRON R DAY 442

Mailing Address 395 E PIONEER TRL

City State Zip Code
AURORA OH 44202

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

Name of Employer NONE Occupation SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.7852

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
MS VIRGININA H DEANE 838

Mailing Address 490 HIDDEN VALLEY RD

City State Zip Code
SANDPOINT ID 83864

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.7880

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR PAUL DECLEVA 752

Mailing Address HARTFORD BLDG

City State Zip Code
DALLAS TX 75201

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

Name of Employer NONE Occupation SELF EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: SA11AI.7902

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **810.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR PAUL DECLEVA 752

Mailing Address HARTFORD BLDG

City State Zip Code
DALLAS TX 75201

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

Name of Employer NONE Occupation SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: SA11AI.7903

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR PAUL DECLEVA 752

Mailing Address HARTFORD BLDG

City State Zip Code
DALLAS TX 75201

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

Name of Employer NONE Occupation SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2009

Transaction ID: SA11AI.7904

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR PAUL DEELEVA 752

Mailing Address 325 N SAINT PAUL ST

City State Zip Code
DALLAS TX 75201

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

Name of Employer NONE Occupation SELF EMPLOYED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: SA11AI.7915

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ▶ **675.00**

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

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

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

FOR LINE NUMBER: PAGE 23 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR MATTHEW T DEKAY 874

Mailing Address 6211 FOOTHILLS DR

City State Zip Code
FARMINGTON NM 87402

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	0	9

Transaction ID: SA11AI.7934

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
DR MICHAEL DRASS 166

Mailing Address 1023 PENN VIEW LN

City State Zip Code
DUNCANSVILLE PA 16635

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

Name of Employer Occupation
DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	9

Transaction ID: SA11AI.8327

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
DR GRANT DUNCAN 927

Mailing Address 1822 BEVERLY GLEN DR

City State Zip Code
SANTA ANA CA 92705

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	0	9

Transaction ID: SA11AI.8393

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) MR JAMES DURATZ 163		Date of Receipt																					
	Mailing Address PO BOX 497		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		2	6		2	0	0	9														
	City State Zip Code MEADVILLE PA 16335		Transaction ID: SA11AI.8431																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00																						
Name of Employer Occupation		Aggregate Year-to-Date ▼ 500.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

B.	Full Name (Last, First, Middle Initial) MR RICHARD F EDMONDS 189		Date of Receipt																					
	Mailing Address 294 WESTMINSTER LN		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		3	0		2	0	0	9														
	City State Zip Code SOUDERTON PA 18964		Transaction ID: SA11AI.8557																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00																						
Name of Employer Occupation NONE RETIRED		Aggregate Year-to-Date ▼ 250.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

C.	Full Name (Last, First, Middle Initial) MRS MURIEL ELLIOTT 334		Date of Receipt																					
	Mailing Address 19900 BEACH RD		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		0	1		2	0	0	9														
	City State Zip Code JUPITER FL 33469		Transaction ID: SA11AI.8640																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00																						
Name of Employer Occupation NONE RETIRED		Aggregate Year-to-Date ▼ 300.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

SUBTOTAL of Receipts This Page (optional) ▶

800.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MRS MURIEL ELLIOTT 334
 Mailing Address 19900 BEACH RD
 City State Zip Code
 JUPITER FL 33469
 Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2009
Transaction ID: SA11AI.8641
 Amount of Each Receipt this Period
 200.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

B. Full Name (Last, First, Middle Initial)
MARJORIE ELLIS 836
 Mailing Address 1100 BURNETT DR UNIT 509
 City State Zip Code
 NAMPA ID 83651
 Date of Receipt
 M M / D D / Y Y Y Y
 02 / 09 / 2009
Transaction ID: SA11AI.8662
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOME ALONE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM R ENGEL 501
 Mailing Address 7059 COBURN LN
 City State Zip Code
 JOHNSTON IA 50131
 Date of Receipt
 M M / D D / Y Y Y Y
 02 / 12 / 2009
Transaction ID: SA11AI.8694
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR WILLIAM R ENGEL 501

Mailing Address 7059 COBURN LN

City State Zip Code
JOHNSTON IA 50131

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 09 / 2009

Transaction ID: SA11AI.8695

Amount of Each Receipt this Period
200.00

B.

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

Mailing Address PO BOX 428

City State Zip Code
CASTINE ME 04421

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 20 / 2009

Transaction ID: SA11AI.8728

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
MR GEORGE J FARHA 672

Mailing Address 300 N TERRACE DR

City State Zip Code
WICHITA KS 67208

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

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 09 / 2009

Transaction ID: SA11AI.8893

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶

900.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 132
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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 MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) MR ROBERT B FERGUSON 926	Date of Receipt MM / DD / YYYY 02 / 10 / 2009
	Mailing Address 23072 LAKE CENTER DR STE 205	Transaction ID: SA11AI.8990
	City State Zip Code LAKE FOREST CA 92630	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

B.	Full Name (Last, First, Middle Initial) MR ROBERT B FERGUSON 926	Date of Receipt MM / DD / YYYY 04 / 06 / 2009
	Mailing Address 23072 LAKE CENTER DR STE 205	Transaction ID: SA11AI.8991
	City State Zip Code LAKE FOREST CA 92630	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

C.	Full Name (Last, First, Middle Initial) MR CHARLES V FINELL 939	Date of Receipt MM / DD / YYYY 06 / 01 / 2009
	Mailing Address 402 W CARMEL VALLEY RD	Transaction ID: SA11AI.9063
	City State Zip Code CARMEL VALLEY CA 93924	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 28 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR CHARLES V FINELL 939
 Mailing Address 402 W CARMEL VALLEY RD
 City State Zip Code
 CARMEL VALLEY CA 93924
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 9 / 2 0 0 9
Transaction ID: SA11AI.9064
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

B. Full Name (Last, First, Middle Initial)
MS REGINA H FORTENBERRY 395
 Mailing Address 138 HAYDEN DALE RD
 City State Zip Code
 WIGGINS MS 39577
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 4 / 2 0 0 9
Transaction ID: SA11AI.9295
 Amount of Each Receipt this Period
 55.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.00

C. Full Name (Last, First, Middle Initial)
MS REGINA H FORTENBERRY 395
 Mailing Address 138 HAYDEN DALE RD
 City State Zip Code
 WIGGINS MS 39577
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 1 / 2 0 0 9
Transaction ID: SA11AI.9296
 Amount of Each Receipt this Period
 35.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

SUBTOTAL of Receipts This Page (optional) ► 190.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR PATRICK FRANJE 525
Mailing Address 424 COLLEGE HILL AVE
City OSKALOOSA State IA Zip Code 52577
FEC ID number of contributing federal political committee. **C**

Date of Receipt
MM / DD / YYYY
05 / 26 / 2009
Transaction ID: SA11AI.9402
Amount of Each Receipt this Period
35.00

Name of Employer OHAMWA REGIONAL HEALTH CENTER Occupation SOCIAL WORK
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 205.00

B. Full Name (Last, First, Middle Initial)
MR EUGENE FREEDMAN 024
Mailing Address 63 SYLVAN LN
City WESTON State MA Zip Code 02493
FEC ID number of contributing federal political committee. **C**

Date of Receipt
MM / DD / YYYY
05 / 20 / 2009
Transaction ID: SA11AI.9435
Amount of Each Receipt this Period
250.00

Name of Employer Occupation
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 250.00

C. Full Name (Last, First, Middle Initial)
MR ROBERT GANNETT 053
Mailing Address 619 PLEASANT VALLEY RD
City BRATTLEBORO State VT Zip Code 05301
FEC ID number of contributing federal political committee. **C**

Date of Receipt
MM / DD / YYYY
01 / 12 / 2009
Transaction ID: SA11AI.9604
Amount of Each Receipt this Period
250.00

Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date 250.00

SUBTOTAL of Receipts This Page (optional) **535.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR ROBERT GANNETT 053

Mailing Address 619 PLEASANT VALLEY RD

City State Zip Code
BRATTLEBORO VT 05301

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2009

Transaction ID: SA11AI.9605

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
MR ROBERT GANNETT 053

Mailing Address 619 PLEASANT VALLEY RD

City State Zip Code
BRATTLEBORO VT 05301

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 925.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2009

Transaction ID: SA11AI.9606

Amount of Each Receipt this Period
600.00

C.

Full Name (Last, First, Middle Initial)
MR ROBERT GANNETT 053

Mailing Address 619 PLEASANT VALLEY RD

City State Zip Code
BRATTLEBORO VT 05301

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1225.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2009

Transaction ID: SA11AI.9607

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **975.00**

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

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

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

FOR LINE NUMBER: PAGE 31 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR ROBERT GANNETT 053

Mailing Address 619 PLEASANT VALLEY RD

City State Zip Code
BRATTLEBORO VT 05301

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1475.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2009

Transaction ID: SA11AI.9608

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR LOUIS T GETTERMAN 767, JR

Mailing Address 5 HILLANDALE RD

City State Zip Code
WACO TX 76710

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2009

Transaction ID: SA11AI.9761

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
DR LEWIS GLASSER 029, MD

Mailing Address 168 ELMGROVE AVE

City State Zip Code
PROVIDENCE RI 02906

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

Name of Employer CBR FORMERLY RI HOSPITAL Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2009

Transaction ID: SA11AI.9862

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MRS BRENDA J GOTTLIEB 462
Mailing Address 8801 HUNTING TRL
City INDIANAPOLIS State IN Zip Code 46217
FEC ID number of contributing federal political committee. **C**
Name of Employer GMG MOTORS INCE Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 04 / 01 / 2009
Transaction ID: SA11AI.9991
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
MR RICHARD S GRIFFITH 705
Mailing Address PO BOX 91610
City LAFAYETTE State LA Zip Code 70509
FEC ID number of contributing federal political committee. **C**
Name of Employer RICHARD S GRIFFITH Occupation INVESTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00
Date of Receipt 02 / 13 / 2009
Transaction ID: SA11AI.10190
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
MR RICHARD S GRIFFITH 705
Mailing Address PO BOX 91610
City LAFAYETTE State LA Zip Code 70509
FEC ID number of contributing federal political committee. **C**
Name of Employer RICHARD S GRIFFITH Occupation INVESTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2100.00
Date of Receipt 02 / 13 / 2009
Transaction ID: SA11AI.10191
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2300.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 33 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR RICHARD S GRIFFITH 705
Mailing Address PO BOX 91610

City State Zip Code
LAFAYETTE LA 70509

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

Name of Employer Occupation
RICHARD S GRIFFITH INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2200.00

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

Transaction ID: SA11AI.10192

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR RICHARD S GRIFFITH 705
Mailing Address PO BOX 91610

City State Zip Code
LAFAYETTE LA 70509

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

Name of Employer Occupation
RICHARD S GRIFFITH INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2700.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.10193

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
KAY D GUILLES 200
Mailing Address 340 M ST SW

City State Zip Code
WASHINGTON DC 20024

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

Name of Employer Occupation
LIBRARY OF CONGRESS LIBRARIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.10297

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 850.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MRS INDA D HAHN 787

Mailing Address 1034 LIBERTY PARK DR APT 314

City State Zip Code
AUSTIN TX 78746

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.10395

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
MR RALPH HANDWERK 180

Mailing Address 2717 NORTH LN

City State Zip Code
OREFIELD PA 18069

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.10500

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
MRS VIOLET HANNA 916

Mailing Address 4123 MARY ELLEN AVE

City State Zip Code
STUDIO CITY CA 91604

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.10524

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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 35 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MRS VIOLET HANNA 916

Mailing Address 4123 MARY ELLEN AVE

City State Zip Code
STUDIO CITY CA 91604

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.10525

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MR PETER R HARADER 981

Mailing Address 2100 S 260TH ST APT N101

City State Zip Code
DES MOINES WA 98198

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

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.10568

Amount of Each Receipt this Period

140.00

C.

Full Name (Last, First, Middle Initial)
MR WILLIAM HARLAN 850

Mailing Address 118 W MARYLAND AVE APT 114

City State Zip Code
PHOENIX AZ 85013

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.10626

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

490.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
DR JOHN J HARTFORD 945, MD

Mailing Address 3644 TERRA GRANADA DR APT 2A

City State Zip Code
WALNUT CREEK CA 94595

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
04 / 13 / 2009

Transaction ID: SA11AI.10683

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
GORDON HARTUNIAN 483

Mailing Address 5261 N BAY DR

City State Zip Code
ORCHARD LAKE MI 48324

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: SA11AI.10694

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR CLARENCE A HAVERLY 078

Mailing Address 24 MOSSWOOD TRL

City State Zip Code
DENVERVILLE NJ 07834

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: SA11AI.10781

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MISS AGNES R HAYDEN 349

Mailing Address 3420 NE SUGARHILL AVE

City State Zip Code
JENSEN BEACH FL 34957

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
04 / 27 / 2009

Transaction ID: SA11AI.10807

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
MR WILLIAM A HECK 797

Mailing Address PO BOX 50610

City State Zip Code
MIDLAND TX 79710

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

Name of Employer SELF EMPLOYED Occupation GEOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 05 / 2009

Transaction ID: SA11AI.10859

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
MRS ROSEMARY L HEGENBART 912

Mailing Address 6266 ALTURA AVE

City State Zip Code
LA CRESCENTA CA 91214

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 29 / 2009

Transaction ID: SA11AI.10881

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► **735.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MRS ROSEMARY L HEGENBART 912

Mailing Address 6266 ALTURA AVE

City State Zip Code
LA CRESCENTA CA 91214

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.10882

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MRS DORIS T HENDRICKS 212

Mailing Address 8810 WALTHER BLVD APT 2229

City State Zip Code
BALTIMORE MD 21234

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 290.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.10971

Amount of Each Receipt this Period

115.00

C.

Full Name (Last, First, Middle Initial)
MR GENE W HEWETT 752

Mailing Address 3709 EUCLID AVE

City State Zip Code
DALLAS TX 75205

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.11089

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

365.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR CHARLES W HIGGINS 339

Mailing Address 11601 OAKMONT CT

City State Zip Code
FORT MYERS FL 33908

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.11143

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
JEFFREY A HIRSCH 900

Mailing Address 10515 LINDBROOK DR

City State Zip Code
LOS ANGELES CA 90024

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.11218

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MR CHARLES HOLTZ 800

Mailing Address 13901 E MARINA DR
20

City State Zip Code
AURORA CO 80014

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.11348

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) ▶

850.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR ROBERT HROMADNIK 660
Mailing Address PO BOX 562
City OSAWATOMIE State KS Zip Code 66064
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 04 / 24 / 2009
Transaction ID: SA11AI.11477
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
MR VINCENT S HUGHES 328
Mailing Address 560 IVANHOE PLZ
City ORLANDO State FL Zip Code 32804
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 02 / 11 / 2009
Transaction ID: SA11AI.11525
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
MRS LORENA M JAEB 335
Mailing Address PO BOX 428 REAL ESTATE
City MANGO State FL Zip Code 33550
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 01 / 12 / 2009
Transaction ID: SA11AI.11720
Amount of Each Receipt this Period 1000.00

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 41 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR DAVID M JAMES 368

Mailing Address PO BOX 747

City	State	Zip Code
OPELIKA	AL	36803

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	9

Transaction ID: SA11AI.11729

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
MR DAVID M JAMES 368

Mailing Address PO BOX 747

City	State	Zip Code
OPELIKA	AL	36803

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	9

Transaction ID: SA11AI.11730

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
MR DAVID JAMIESON 895

Mailing Address 1701 NEWPORT LN

City	State	Zip Code
RENO	NV	89506

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.11737

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

650.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
ERIC JAVITS 334

Mailing Address 150 BRADLEY PL APT 407

City State Zip Code
PALM BEACH FL 33480

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

Name of Employer Occupation
DEPT OF STATE DIPLOMAT

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

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.11760

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MR PHIL F JENKINS 481

Mailing Address 2041 GREENVIEW DR

City State Zip Code
ANN ARBOR MI 48103

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

Name of Employer Occupation
SWEEPSTAR INC MANUFACTURING REP

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

Date of Receipt

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

Transaction ID: SA11AI.11780

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
MRS MARIAN JENSEN 841

Mailing Address 171 3RD AVE APT 612

City State Zip Code
SALT LAKE CITY UT 84103

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.11812

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) ▶

900.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MRS MARIAN JENSEN 841

Mailing Address 171 3RD AVE APT 612

City State Zip Code
SALT LAKE CITY UT 84103

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2009

Transaction ID: SA11AI.11813

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
MR BRYON JOHNSON 530

Mailing Address N170W20239 HUNTERS RD

City State Zip Code
JACKSON WI 53037

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

Name of Employer MEDICAL COLLEGE OF WISCONSIN Occupation SCIENTIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 20 / 2009

Transaction ID: SA11AI.11890

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MR BEN JOHNSON 710, III

Mailing Address PO BOX 632

City State Zip Code
MANSFIELD LA 71052

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

Name of Employer SELF EMPLOYED Occupation OIL & GAS PRODUCTION

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
04 / 10 / 2009

Transaction ID: SA11AI.11916

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR PETER O JOHNSTON 100

Mailing Address 25 W 53RD ST

City State Zip Code
NEW YORK NY 10019

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

Name of Employer Occupation
CITIGROUP GLOBAL PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11AI.11960

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR HOWLAND B JONES 064, JR

Mailing Address 217 ESSEX MDWS

City State Zip Code
ESSEX CT 06426

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.11972

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MR IRA J KAIL 245

Mailing Address 501 V E S RD

City State Zip Code
LYNCHBURG VA 24503

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11AI.12099

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR JOSEPH S KEELTY 212

Mailing Address 1011 WINDING WAY

City State Zip Code
BALTIMORE MD 21210

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.12198

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
MR JOSEPH S KEELTY 212

Mailing Address 1011 WINDING WAY

City State Zip Code
BALTIMORE MD 21210

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 3 / 2 0 0 9

Transaction ID: SA11AI.12199

Amount of Each Receipt this Period

3000.00

C.

Full Name (Last, First, Middle Initial)
MR JAMES S KERNAN 134

Mailing Address 273 CLINTON ST

City State Zip Code
WHITESBORO NY 13492

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 475.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.12322

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)

5375.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR RUSSELL W KILMER 320

Mailing Address 411 WALNUT ST #4352

City State Zip Code
GREEN COVE SPRS FL 32043

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	6		2	0	0	9

Transaction ID: SA11AI.12379

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
MRS CARROLL K KING 085

Mailing Address 2432 WINDROW DR

City State Zip Code
PRINCETON NJ 08540

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	0	9

Transaction ID: SA11AI.12398

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)
MR LEONARD M KIRK 210

Mailing Address 6 HUNTER DR

City State Zip Code
BEL AIR MD 21014

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	0	9

Transaction ID: SA11AI.12455

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional) ►

775.00

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

--

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR JAMES LAIN 926

Mailing Address 16116 BONAIRE CIR

City State Zip Code
HUNTINGTON BEACH CA 92649

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2009

Transaction ID: SA11AI.12881

Amount of Each Receipt this Period
50.00

B.

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

Mailing Address 4031 KENNETT PIKE

City State Zip Code
GREENVILLE DE 19807

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2009

Transaction ID: SA11AI.12883

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MRS CAROL LAMI 601

Mailing Address 453 WYNDEMERE CIR

City State Zip Code
WHEATON IL 60187

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2009

Transaction ID: SA11AI.12917

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **450.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 132
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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 MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) MRS MARCIA P LANE 397	Date of Receipt MM / DD / YYYY 05 / 26 / 2009
	Mailing Address 1449 W LINDSEY FERRY RD	Transaction ID: SA11AI.12945
	City State Zip Code COLUMBUS MS 39701	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SELF EMPLOYED INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) MR VICTOR A LAZAR 148	Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 108 WOOLF LN	Transaction ID: SA11AI.13135
	City State Zip Code ITHACA NY 14850	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NONE RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MR MICHAEL S LEHNKERING 194	Date of Receipt MM / DD / YYYY 06 / 19 / 2009
	Mailing Address 1032 BODINE RD	Transaction ID: SA11AI.13195
	City State Zip Code CHESTER SPRINGS PA 19425	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MSI ASSOCIATES LTD ARCHITECT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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 49 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR ROLLISTON W LINSOTT 342, JR
 Mailing Address 3710 GULF OF MEXICO DR LOT C18
 City State Zip Code
 LONGBOAT KEY FL 34228
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 06 / 2009
Transaction ID: SA11AI.13390
 Amount of Each Receipt this Period
 300.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

B. Full Name (Last, First, Middle Initial)
MR LEONARD LITWIN 110
 Mailing Address 18 BROADLAWN AVE
 City State Zip Code
 GREAT NECK NY 11024
 Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 30 / 2009
Transaction ID: SA11AI.13409
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GLENWOOD MANAGEMENT Occupation REAL ESTATE DEVELOPER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial)
MR THOMAS A LUPTON 373, JR
 Mailing Address 1 FORT STEPHENSON PL
 City State Zip Code
 LOOKOUT MOUNTAIN TN 37350
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 06 / 2009
Transaction ID: SA11AI.13602
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR PERRIN MARCH 452, III
Mailing Address 7 GRANDIN PL

City State Zip Code
CINCINNATI OH 45208

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

Name of Employer Occupation
CINCINNATTI INC MANUFACTURER

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

Date of Receipt

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

Transaction ID: SA11AI.13842

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
MR DANIEL D MARTIN 620
Mailing Address RR 3 BOX 115

City State Zip Code
CARROLLTON IL 62016

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.13945

Amount of Each Receipt this Period

450.00

C.

Full Name (Last, First, Middle Initial)
MR DANIEL D MARTIN 620
Mailing Address RR 3 BOX 115

City State Zip Code
CARROLLTON IL 62016

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

Transaction ID: SA11AI.13946

Amount of Each Receipt this Period

900.00

SUBTOTAL of Receipts This Page (optional)

1850.00

TOTAL This Period (last page this line number only)

--

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MRS MARY LOU MATHIOWETZ 560

Mailing Address 30817 COUNTY ROAD 24

City State Zip Code
SLEEPY EYE MN 56085

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.14035

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
MR RANDALL MATLOCK 371

Mailing Address 151 HERITAGE PARK DR STE 301

City State Zip Code
MURFREESBORO TN 37129

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

Name of Employer Occupation
SELF EMPLOYED ACCOUNTANT

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

Date of Receipt

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

Transaction ID: SA11AI.14037

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MR ERNEST N MAY 200, JR

Mailing Address 4060 52ND TER NW

City State Zip Code
WASHINGTON DC 20016

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.14115

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

650.00

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

--

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

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

FOR LINE NUMBER: PAGE 52 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
WALTER MCCAULEY 824
 Mailing Address 633 SAWTOOTH ST
 City State Zip Code
 POWELL WY 82435
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 09 / 2009
Transaction ID: SA11AI.14227
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF EMPLOYED CPA
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

B. Full Name (Last, First, Middle Initial)
MABEL B MCCLUSKY 352
 Mailing Address 801 MEADOWBROOK DR
 City State Zip Code
 BIRMINGHAM AL 35215
 Date of Receipt
 M M / D D / Y Y Y Y
 06 / 22 / 2009
Transaction ID: SA11AI.14247
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Occupation
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

C. Full Name (Last, First, Middle Initial)
MR LELAND C MCGILL 802
 Mailing Address 4245 E 46TH AVE
 City State Zip Code
 DENVER CO 80216
 Date of Receipt
 M M / D D / Y Y Y Y
 05 / 11 / 2009
Transaction ID: SA11AI.14342
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 850.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR PAUL MCGOLDRICK 035

Mailing Address 106 MAIN ST

City LITTLETON State NH Zip Code 03561

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

Name of Employer SELF EMPLOYED Occupation SALESMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 11 / 2009

Transaction ID: SA11AI.14353

Amount of Each Receipt this Period
 50.00

B.

Full Name (Last, First, Middle Initial)
MR PAUL MCGOLDRICK 035

Mailing Address 106 MAIN ST

City LITTLETON State NH Zip Code 03561

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

Name of Employer SELF EMPLOYED Occupation SALESMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 03 / 2009

Transaction ID: SA11AI.14354

Amount of Each Receipt this Period
 50.00

C.

Full Name (Last, First, Middle Initial)
MR PAUL MCGOLDRICK 035

Mailing Address 106 MAIN ST

City LITTLETON State NH Zip Code 03561

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

Name of Employer SELF EMPLOYED Occupation SALESMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 20 / 2009

Transaction ID: SA11AI.14355

Amount of Each Receipt this Period
 100.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR PAUL MCGOLDRICK 035

Mailing Address 106 MAIN ST

City State Zip Code
LITTLETON NH 03561

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

Name of Employer SELF EMPLOYED Occupation SALESMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 435.00

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

Transaction ID: SA11AI.14356

Amount of Each Receipt this Period 35.00

B. Full Name (Last, First, Middle Initial)
MR PAUL MCGOLDRICK 035

Mailing Address 106 MAIN ST

City State Zip Code
LITTLETON NH 03561

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

Name of Employer SELF EMPLOYED Occupation SALESMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt: M M / D D / Y Y Y Y Y
0 6 / 2 9 / 2 0 0 9

Transaction ID: SA11AI.14357

Amount of Each Receipt this Period 35.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM MCGUIRE 751

Mailing Address 3913 MODLIN ST

City State Zip Code
MESQUITE TX 75150

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.14381

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ▶ **270.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR WILLIAM MCGUIRE 751

Mailing Address 3913 MODLIN ST

City State Zip Code
MESQUITE TX 75150

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

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE BROKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 26 / 2009

Transaction ID: SA11AI.14382

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
MRS MARGARET MCIVER 271

Mailing Address 5400 COVENANT LN

City State Zip Code
WINSTON SALEM NC 27106

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 11 / 2009

Transaction ID: SA11AI.14402

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN F MCLEAN 299, JR

Mailing Address 106 SHORELINE DR

City State Zip Code
HILTON HEAD ISLAND SC 29928

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2009

Transaction ID: SA11AI.14467

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
BILLY MCLEOD 221

Mailing Address 7452 SPRING VILLAGE DR APT 225

City State Zip Code
SPRINGFIELD VA 22150

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 15 / 2009

Transaction ID: SA11AI.14469

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MRS JOAN MEAKER 719

Mailing Address 32 LODOSA LN

City State Zip Code
HOT SPRINGS VILLAG AR 71909

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 26 / 2009

Transaction ID: SA11AI.14522

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MISS MARY MELTZER 139

Mailing Address 14 EDGECOMB RD

City State Zip Code
BINGHAMTON NY 13905

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: SA11AI.14582

Amount of Each Receipt this Period

750.00

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: PAGE 57 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MISS MARY MELTZER 139

Mailing Address 14 EDGECOMB RD

City State Zip Code
BINGHAMTON NY 13905

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: SA11AI.14583

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
MR DAVID W MILES 180

Mailing Address 7686 HERBER RD

City State Zip Code
NEW TRIPOLI PA 18066

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
02 / 11 / 2009

Transaction ID: SA11AI.14705

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
MR ROSS MILLER 080

Mailing Address 8 W LAKE AVE

City State Zip Code
MEDFORD NJ 08055

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2009

Transaction ID: SA11AI.14723

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
THOMAS MIMS 770

Mailing Address 1655 BANKS ST

City State Zip Code
HOUSTON TX 77006

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

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

Date of Receipt

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

Transaction ID: SA11AI.14813

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
THOMAS MIMS 770

Mailing Address 1655 BANKS ST

City State Zip Code
HOUSTON TX 77006

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

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

Date of Receipt

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

Transaction ID: SA11AI.14814

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN L MINTER 779

Mailing Address 116 SEASCAPE DR

City State Zip Code
PORT LAVACA TX 77979

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.14846

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

575.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
RUTH MONTGOMERY 752

Mailing Address 4242 LOMO ALTO DR APT N40

City State Zip Code
DALLAS TX 75219

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: SA11AI.14940

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
DR CRAIG M MORGAN 257

Mailing Address 200 CAMELOT DR

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
DOCTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2009

Transaction ID: SA11AI.15011

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
IA MORRIS 144

Mailing Address 2867 OUTLET RD

City State Zip Code
CLIFTON SPRINGS NY 14432

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

Name of Employer Occupation
GW LISK CO INC ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 09 / 2009

Transaction ID: SA11AI.15050

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 132
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) IA MORRIS 144	Date of Receipt MM / DD / YYYY 05 / 26 / 2009
	Mailing Address 2867 OUTLET RD	Transaction ID: SA11AI.15051
	City State Zip Code CLIFTON SPRINGS NY 14432	Amount of Each Receipt this Period 375.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation GW LISK CO INC ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

B.	Full Name (Last, First, Middle Initial) MR STEVEN M NAPOLITANO 100	Date of Receipt MM / DD / YYYY 02 / 11 / 2009
	Mailing Address 633 3RD AVE FL 16	Transaction ID: SA11AI.15307
	City State Zip Code NEW YORK NY 10017	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation FIRST AMERICAN TITLE INS PRESIDENT CHAIRMAN CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

C.	Full Name (Last, First, Middle Initial) MR GEORGE M NEALL 216, II	Date of Receipt MM / DD / YYYY 02 / 11 / 2009
	Mailing Address 5452 TATES BANK RD	Transaction ID: SA11AI.15351
	City State Zip Code CAMBRIDGE MD 21613	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation NONE RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	3125.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR GEORGE M NEALL 216, II

Mailing Address 5452 TATES BANK RD

City State Zip Code
CAMBRIDGE MD 21613

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: SA11AI.15352

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MS PHYLLIS W NICHOLAS 068

Mailing Address 40 HOWARD RD

City State Zip Code
GREENWICH CT 06830

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2009

Transaction ID: SA11AI.15465

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MS PHYLLIS W NICHOLAS 068

Mailing Address 40 HOWARD RD

City State Zip Code
GREENWICH CT 06830

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: SA11AI.15466

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 700.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MS PHYLLIS W NICHOLAS 068

Mailing Address 40 HOWARD RD

City State Zip Code
GREENWICH CT 06830

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
06 / 19 / 2009

Transaction ID: SA11AI.15467

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR CHARLES F NOVAK 441

Mailing Address 21445 RIVIERA DR

City State Zip Code
CLEVELAND OH 44126

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 970.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2009

Transaction ID: SA11AI.15590

Amount of Each Receipt this Period
970.00

C. Full Name (Last, First, Middle Initial)
MR EDWARD S OLSON 296, JR

Mailing Address PO BOX 1075

City State Zip Code
EASLEY SC 29641

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: SA11AI.15773

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional) ► 1130.00

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 63 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MISS EDITH P PALMER 109

Mailing Address 2825 LAROE RD

City State Zip Code
CHESTER NY 10918

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

Name of Employer Occupation
NONE HOMEMAKER

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

Date of Receipt

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

Transaction ID: SA11AI.15988

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN PENSON 752

Mailing Address 3756 ARMSTRONG AVE

City State Zip Code
DALLAS TX 75205

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

Name of Employer Occupation
SELF EMPLOYED INVESTMENTS

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

Date of Receipt

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

Transaction ID: SA11AI.16292

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MR GEORGE PFAFF 288

Mailing Address 16 BEAVER CREEK LN

City State Zip Code
ASHEVILLE NC 28804

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.16437

Amount of Each Receipt this Period

250.00

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 64 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR EDWARD W POITRAS 338

Mailing Address 27 LAKE HAMILTON BCH

City State Zip Code
HAINES CITY FL 33844

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	0	9

Transaction ID: SA11AI.16616

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
EDWIN B POLLOCK 309

Mailing Address 1135 MONTE SANO AVE

City State Zip Code
AUGUSTA GA 30904

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

Name of Employer Occupation

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	9

Transaction ID: SA11AI.16635

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
EDWIN B POLLOCK 309

Mailing Address 1135 MONTE SANO AVE

City State Zip Code
AUGUSTA GA 30904

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	2		2	0	0	9

Transaction ID: SA11AI.16636

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

--

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

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

FOR LINE NUMBER: PAGE 65 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MARSHA PRESTAGE 283
Mailing Address 406 COHARIE DR
City CLINTON State NC Zip Code 28328
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 02 / 20 / 2009
Transaction ID: SA11AI.16744
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
MARSHA PRESTAGE 283
Mailing Address 406 COHARIE DR
City CLINTON State NC Zip Code 28328
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 04 / 06 / 2009
Transaction ID: SA11AI.16745
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
MS CLAIRE RAINS 941
Mailing Address 420 41ST AVE
City SAN FRANCISCO State CA Zip Code 94121
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00
Date of Receipt 04 / 24 / 2009
Transaction ID: SA11AI.16889
Amount of Each Receipt this Period 100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MS CLAIRE RAINS 941

Mailing Address 420 41ST AVE

City State Zip Code
SAN FRANCISCO CA 94121

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt
MM / DD / YYYY
06 / 22 / 2009

Transaction ID: SA11AI.16890

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
MR WILLIAM D RANKIN 152

Mailing Address 220 N DITHRIDGE ST APT 1000

City State Zip Code
PITTSBURGH PA 15213

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 13 / 2009

Transaction ID: SA11AI.16924

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
MR PETER RHEIN 900

Mailing Address 1407 HOLMBY AVE

City State Zip Code
LOS ANGELES CA 90024

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
04 / 03 / 2009

Transaction ID: SA11AI.17153

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR WILLIAM B RICE 410

Mailing Address 6910 HOPEFUL RD #2112

City State Zip Code
FLORENCE KY 41042

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	3		2	0	0	9

Transaction ID: SA11AI.17171

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
MRS CAROL RICHARDS 926

Mailing Address 3 PURSUIT

City State Zip Code
ALISO VIEJO CA 92656

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	9

Transaction ID: SA11AI.17200

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MR LUNSFORD RICHARDSON 068, JR

Mailing Address 7 INDIAN SPRING RD

City State Zip Code
NORWALK CT 06853

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	9

Transaction ID: SA11AI.17204

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) ▶

1450.00

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

--

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

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

FOR LINE NUMBER: PAGE 68 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MS M RICHARDSON 288

Mailing Address 1617 HENDERSONVILLE RD

City State Zip Code
ASHEVILLE NC 28803

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: SA11AI.17210

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
MS M RICHARDSON 288

Mailing Address 1617 HENDERSONVILLE RD

City State Zip Code
ASHEVILLE NC 28803

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y
04 / 29 / 2009

Transaction ID: SA11AI.17211

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
MARIAN ROCHELLE 820

Mailing Address PO BOX 1145

City State Zip Code
CHEYENNE WY 82003

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

Name of Employer Occupation
NONE HOMEMAKER

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

Date of Receipt

M M / D D / Y Y Y Y
02 / 20 / 2009

Transaction ID: SA11AI.17413

Amount of Each Receipt this Period

1000.00

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: PAGE 69 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR DEAN ROMBERGER 674

Mailing Address 1317 NW 5TH ST

City State Zip Code
ABILENE KS 67410

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

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

Transaction ID: SA11AI.17511

Amount of Each Receipt this Period

30.00

B.

Full Name (Last, First, Middle Initial)
MS MARY ROSENCRANZ 063

Mailing Address 186 JERRY BROWNE RD

City State Zip Code
MYSTIC CT 06355

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.17562

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
MS MARY ROSENCRANZ 063

Mailing Address 186 JERRY BROWNE RD

City State Zip Code
MYSTIC CT 06355

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 0 / 2 0 0 9

Transaction ID: SA11AI.17563

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) ▶

180.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MS MARY ROSENCRANZ 063

Mailing Address 186 JERRY BROWNE RD

City State Zip Code
MYSTIC CT 06355

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.17564

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MS JANICE B RUBEL 331

Mailing Address 2000 S BAYSHORE DR

City State Zip Code
MIAMI FL 33133

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

Name of Employer Occupation
INNISFREE, INC IMPORT SPECIALIST

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

Date of Receipt

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

Transaction ID: SA11AI.17635

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MRS MARIAN L RUSSELL 326

Mailing Address 5100 SW 25TH BLVD # 2206

City State Zip Code
GAINESVILLE FL 32608

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

Name of Employer Occupation

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

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.17692

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

550.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code
PALM CITY FL 34990

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.17812

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code
PALM CITY FL 34990

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.17813

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code
PALM CITY FL 34990

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt

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

Transaction ID: SA11AI.17814

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

600.00

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

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

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

FOR LINE NUMBER: PAGE 72 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code
PALM CITY FL 34990

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	2	/	2	0	0	9

Transaction ID: SA11AI.17815

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MRS ELIZABETH J SCHAFER 921

Mailing Address 1101 IST ST NIT 411

City State Zip Code
CORONADO CA 92118

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: SA11AI.17940

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS ELIZABETH J SCHAFER 921

Mailing Address 1101 IST ST NIT 411

City State Zip Code
CORONADO CA 92118

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	4	/	2	0	0	9

Transaction ID: SA11AI.17941

Amount of Each Receipt this Period
375.00

SUBTOTAL of Receipts This Page (optional) ► **875.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR CHARLES G SCHAPPERT 080

Mailing Address 1224 FOREST PKWY

City PAULSBORO State NJ Zip Code 08066

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

Name of Employer SCHAPPERT MANAGEMENT Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
05 / 18 / 2009

Transaction ID: SA11AI.17957

Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
MRS JOAN SCHONHOLTZ 208

Mailing Address 32 BEMAN WOODS CT

City POTOMAC State MD Zip Code 20854

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
04 / 30 / 2009

Transaction ID: SA11AI.18075

Amount of Each Receipt this Period: 250.00

C.

Full Name (Last, First, Middle Initial)
MR THOMAS SCHULSTAD 980

Mailing Address PO BOX 279

City EDMONDS State WA Zip Code 98020

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

Name of Employer HEALTH FIRST CORP Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
06 / 26 / 2009

Transaction ID: SA11AI.18116

Amount of Each Receipt this Period: 250.00

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 74 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MS MARY JANE SHAW 852
 Mailing Address 2625 E SOUTHERN AVE UNIT C119
 City State Zip Code
 TEMPE AZ 85282
 Date of Receipt: MM / DD / YYYY
 02 / 23 / 2009
Transaction ID: SA11AI.18384
 Amount of Each Receipt this Period: 100.00
 FEC ID number of contributing federal political committee: C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 250.00

B. Full Name (Last, First, Middle Initial)
MS MARY JANE SHAW 852
 Mailing Address 2625 E SOUTHERN AVE UNIT C119
 City State Zip Code
 TEMPE AZ 85282
 Date of Receipt: MM / DD / YYYY
 03 / 09 / 2009
Transaction ID: SA11AI.18385
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 300.00

C. Full Name (Last, First, Middle Initial)
MS MARY JANE SHAW 852
 Mailing Address 2625 E SOUTHERN AVE UNIT C119
 City State Zip Code
 TEMPE AZ 85282
 Date of Receipt: MM / DD / YYYY
 04 / 06 / 2009
Transaction ID: SA11AI.18386
 Amount of Each Receipt this Period: 50.00
 FEC ID number of contributing federal political committee: C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼: 350.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MS MARY JANE SHAW 852

Mailing Address 2625 E SOUTHERN AVE UNIT C119

City State Zip Code
TEMPE AZ 85282

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

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

Transaction ID: SA11AI.18387

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR JAMES J SHEA 922, JR

Mailing Address 42600 BOB HOPE DR STE 406

City State Zip Code
RANCHO MIRAGE CA 92270

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.18401

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS MARY L SHEEHAN 752

Mailing Address 5044 MATILDA ST APT 122

City State Zip Code
DALLAS TX 75206

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

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 Y
0 6 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.18412

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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 76 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR RICHARD H SHUTTE 454

Mailing Address 3422 DECOY CT

City State Zip Code
DAYTON OH 45431

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 23 / 2009

Transaction ID: SA11AI.18498

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
MISS ELIZABETH SKAPIN 441

Mailing Address 4445 W 215TH ST

City State Zip Code
FAIRVIEW PARK OH 44126

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
04 / 16 / 2009

Transaction ID: SA11AI.18628

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
MISS ELIZABETH SKAPIN 441

Mailing Address 4445 W 215TH ST

City State Zip Code
FAIRVIEW PARK OH 44126

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
04 / 24 / 2009

Transaction ID: SA11AI.18629

Amount of Each Receipt this Period
25.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MISS ELIZABETH SKAPIN 441

Mailing Address 4445 W 215TH ST

City State Zip Code
FAIRVIEW PARK OH 44126

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

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

Transaction ID: SA11AI.18630

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
MISS ELIZABETH SKAPIN 441

Mailing Address 4445 W 215TH ST

City State Zip Code
FAIRVIEW PARK OH 44126

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.18631

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
MISS ELIZABETH SKAPIN 441

Mailing Address 4445 W 215TH ST

City State Zip Code
FAIRVIEW PARK OH 44126

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.18632

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 75.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MISS ELIZABETH SKAPIN 441

Mailing Address 4445 W 215TH ST

City State Zip Code
FAIRVIEW PARK OH 44126

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 335.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.18633

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)
MISS ELIZABETH SKAPIN 441

Mailing Address 4445 W 215TH ST

City State Zip Code
FAIRVIEW PARK OH 44126

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 360.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.18634

Amount of Each Receipt this Period

25.00

C.

Full Name (Last, First, Middle Initial)
MISS CLAIRE SLEAD 598

Mailing Address PO BOX 592

City State Zip Code
HOT SPRINGS MT 59845

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

Name of Employer Occupation

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

Date of Receipt

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

Transaction ID: SA11AI.18676

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ►

300.00

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

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

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

FOR LINE NUMBER: PAGE 79 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)

AGNES SMITH 675

Mailing Address RR 2 BOX 78

City State Zip Code
MACKSVILLE KS 67557

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.00

Date of Receipt

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

Transaction ID: SA11AI.18801

Amount of Each Receipt this Period

45.00

B.

Full Name (Last, First, Middle Initial)

MS CHARLENE SPRANKEL 625

Mailing Address 120 FENWAY DR

City State Zip Code
DECATUR IL 62521

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

Name of Employer Occupation
RETIRED MATH PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

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

Transaction ID: SA11AI.19016

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

MR HARRY STOUT 479

Mailing Address 1142 CHERRY LN

City State Zip Code
WEST LAFAYETTE IN 47906

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	9

Transaction ID: SA11AI.19305

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) ▶

445.00

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

--

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

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

FOR LINE NUMBER: PAGE 80 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MRS JOHN STRASENBURG 082
 Mailing Address PO BOX 608
 City State Zip Code
 OCEAN VIEW NJ 08230
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 1 0 / 2 0 0 9
Transaction ID: SA11AI.19325
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

B. Full Name (Last, First, Middle Initial)
MRS JOHN STRASENBURG 082
 Mailing Address PO BOX 608
 City State Zip Code
 OCEAN VIEW NJ 08230
 Date of Receipt
 M M / D D / Y Y Y Y
 0 4 / 3 0 / 2 0 0 9
Transaction ID: SA11AI.19326
 Amount of Each Receipt this Period
 300.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

C. Full Name (Last, First, Middle Initial)
MRS JOHN STRASENBURG 082
 Mailing Address PO BOX 608
 City State Zip Code
 OCEAN VIEW NJ 08230
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 0 4 / 2 0 0 9
Transaction ID: SA11AI.19327
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

SUBTOTAL of Receipts This Page (optional) ► 650.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MRS JOHN STRASENBURG 082

Mailing Address PO BOX 608

City State Zip Code
OCEAN VIEW NJ 08230

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt 06 / 26 / 2009
Transaction ID: SA11AI.19328

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
MRS JOHN STRASENBURG 082

Mailing Address PO BOX 608

City State Zip Code
OCEAN VIEW NJ 08230

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 06 / 29 / 2009
Transaction ID: SA11AI.19329

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
ADA ANDERSON STRASENBURGH 082

Mailing Address PO BOX 608

City State Zip Code
OCEAN VIEW NJ 08230

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 14 / 2009
Transaction ID: SA11AI.19332

Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional) 300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 82 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
ADA ANDERSON STRASENBURGH 082
Mailing Address PO BOX 608
City OCEAN VIEW State NJ Zip Code 08230
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 04 / 23 / 2009
Transaction ID: SA11AI.19333
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
ADA ANDERSON STRASENBURGH 082
Mailing Address PO BOX 608
City OCEAN VIEW State NJ Zip Code 08230
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt 05 / 18 / 2009
Transaction ID: SA11AI.19334
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
ADA ANDERSON STRASENBURGH 082
Mailing Address PO BOX 608
City OCEAN VIEW State NJ Zip Code 08230
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 06 / 24 / 2009
Transaction ID: SA11AI.19335
Amount of Each Receipt this Period 100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MISS YOLANDE STRAWINSKI 939

Mailing Address 1130 SYLVAN PL

City State Zip Code
MONTEREY CA 93940

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
290.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.19355

Amount of Each Receipt this Period

120.00

B.

Full Name (Last, First, Middle Initial)
MISS YOLANDE STRAWINSKI 939

Mailing Address 1130 SYLVAN PL

City State Zip Code
MONTEREY CA 93940

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
490.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 0 9

Transaction ID: SA11AI.19356

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
MR ZDZISLAW K STRZALKOWSKI 170

Mailing Address 6 DANDELION DR

City State Zip Code
BOILING SPRINGS PA 17007

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

Name of Employer Occupation
NONE NOT EMPLOYED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.19399

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) ▶

345.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR ROBERT SUNDERLAND 890

Mailing Address 953 PYRITE AVE

City Henderson State NV Zip Code 89011

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt: 05 / 26 / 2009
Transaction ID: SA11AI.19473
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT SUNDERLAND 890

Mailing Address 953 PYRITE AVE

City Henderson State NV Zip Code 89011

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt: 06 / 19 / 2009
Transaction ID: SA11AI.19474
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
GILLIS THOMAS 752

Mailing Address 8333 DOUGLAS AVE STE 1414

City Dallas State TX Zip Code 75225

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: SA11AI.19777
 Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional) ► **5100.00**

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

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

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

FOR LINE NUMBER: PAGE 85 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR GEORGE C TOSTEVIN 981
Mailing Address 12555 37TH AVE NE

City State Zip Code
SEATTLE WA 98125

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: SA11AI.19961

Amount of Each Receipt this Period
151.00

B. Full Name (Last, First, Middle Initial)
MR GEORGE C TOSTEVIN 981
Mailing Address 12555 37TH AVE NE

City State Zip Code
SEATTLE WA 98125

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 352.00

Date of Receipt
MM / DD / YYYY
04 / 14 / 2009

Transaction ID: SA11AI.19962

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR GEORGE C TOSTEVIN 981
Mailing Address 12555 37TH AVE NE

City State Zip Code
SEATTLE WA 98125

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 503.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2009

Transaction ID: SA11AI.19963

Amount of Each Receipt this Period
151.00

SUBTOTAL of Receipts This Page (optional) ► 352.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 86 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MR GEORGE C TOSTEVIN 981

Mailing Address 12555 37TH AVE NE

City State Zip Code
SEATTLE WA 98125

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 603.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 24 / 2009

Transaction ID: SA11AI.19964

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
MR JOHN TOWERS 750

Mailing Address 3312 MELANIE LN

City State Zip Code
PLANO TX 75023

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2009

Transaction ID: SA11AI.19971

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
MR JOHN TOWERS 750

Mailing Address 3312 MELANIE LN

City State Zip Code
PLANO TX 75023

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 28 / 2009

Transaction ID: SA11AI.19972

Amount of Each Receipt this Period
100.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 132
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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 MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) MR JAMES VAN VALKENBURG 190	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 535 GRADYVILLE RD # B125	Transaction ID: SA11AI.20255
	City State Zip Code NEWTOWN SQUARE PA 19073	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) MR WILLIAM R VIVIAN 236	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 955 -214 HARPERSVILLE RD APT 3	Transaction ID: SA11AI.20383
	City State Zip Code NEWPORT NEWS VA 23601	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

C.	Full Name (Last, First, Middle Initial) MR WILLIAM R VIVIAN 236	Date of Receipt MM / DD / YYYY 04 / 24 / 2009
	Mailing Address 955 -214 HARPERSVILLE RD APT 3	Transaction ID: SA11AI.20384
	City State Zip Code NEWPORT NEWS VA 23601	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer NONE Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00

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

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

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

FOR LINE NUMBER: PAGE 88 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR WILLIAM R VIVIAN 236
 Mailing Address 955 -214 HARPERSVILLE RD APT 3
 City State Zip Code
 NEWPORT NEWS VA 23601
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 5 / 2 0 0 9
Transaction ID: SA11AI.20385
 Amount of Each Receipt this Period
 600.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1300.00

B. Full Name (Last, First, Middle Initial)
MR DON A WAGENHEIM 260
 Mailing Address PO BOX 6208
 City State Zip Code
 WHEELING WV 26003
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 2 / 2 0 0 9
Transaction ID: SA11AI.20444
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

C. Full Name (Last, First, Middle Initial)
MR JOHN R WALDEN 653
 Mailing Address 104 E VEST ST
 City State Zip Code
 MARSHALL MO 65340
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 7 / 2 0 0 9
Transaction ID: SA11AI.20472
 Amount of Each Receipt this Period
 5000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

SUBTOTAL of Receipts This Page (optional) ► 5700.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
JOHN WALDRON 151

Mailing Address 7111 PINEHURST CIR

City State Zip Code
PRESTO PA 15142

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
02 / 24 / 2009

Transaction ID: SA11AI.20482

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
MR KENNETH C WALLACE 329

Mailing Address 1840 FREEDOM DR

City State Zip Code
MELBOURNE FL 32940

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

Name of Employer Occupation
US NAVY RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
04 / 06 / 2009

Transaction ID: SA11AI.20527

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MR KENNETH C WALLACE 329

Mailing Address 1840 FREEDOM DR

City State Zip Code
MELBOURNE FL 32940

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

Name of Employer Occupation
US NAVY RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2009

Transaction ID: SA11AI.20528

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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

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

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

FOR LINE NUMBER: PAGE 90 / 132
(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)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial)
MR KENNETH C WALLACE 329
 Mailing Address 1840 FREEDOM DR
 City MELBOURNE State FL Zip Code 32940
 Date of Receipt 06 / 29 / 2009
Transaction ID: SA11AI.20529
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer US NAVY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 400.00

B. Full Name (Last, First, Middle Initial)
MR PERRY L WEINSTEIN 600
 Mailing Address 2848 SHANNON RD
 City NORTHBROOK State IL Zip Code 60062
 Date of Receipt 02 / 12 / 2009
Transaction ID: SA11AI.20744
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer FG MK LLC Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 250.00

C. Full Name (Last, First, Middle Initial)
MR THOMAS WHEELER 270
 Mailing Address 269 FARMLAND RD
 City MOCKSVILLE State NC Zip Code 27028
 Date of Receipt 01 / 23 / 2009
Transaction ID: SA11AI.20856
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 132

(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MRS GEORGIA WIESTER 934

Mailing Address 7760 SANTA ROSA RD

City State Zip Code
BUELLTON CA 93427

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

Name of Employer Occupation
NONE HOMEMAKER

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

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 0 9

Transaction ID: SA11AI.20989

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR JAMES WILLIAMS 338

Mailing Address 3749 CAMRY CT

City State Zip Code
SEBRING FL 33872

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.21099

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
MR LEE WILLIAMS 757

Mailing Address 256 COUNTY ROAD 3270

City State Zip Code
MINEOLA TX 75773

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 213.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.21120

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ►

320.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MRS BARBARA H WILSON 941

Mailing Address 2540 GREEN ST

City State Zip Code
SAN FRANCISCO CA 94123

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 24 / 2009

Transaction ID: SA11AI.21204

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)
MS LORRAINE C WINK 601

Mailing Address 611 S OAKLAND AVE

City State Zip Code
VILLA PARK IL 60181

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 26 / 2009

Transaction ID: SA11AI.21241

Amount of Each Receipt this Period

35.00

C.

Full Name (Last, First, Middle Initial)
MS LORRAINE C WINK 601

Mailing Address 611 S OAKLAND AVE

City State Zip Code
VILLA PARK IL 60181

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
245.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 19 / 2009

Transaction ID: SA11AI.21242

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional) ▶

270.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 132
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
MISS JOSEPHINE E WOODS 245

Mailing Address 1400 ENTERPRISE DR

City State Zip Code
LYNCHBURG VA 24502

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

Name of Employer Occupation
FAIRFAX PUBLIC SCHOOLS EDUCATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: SA11AI.21362

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MISS JOSEPHINE E WOODS 245

Mailing Address 1400 ENTERPRISE DR

City State Zip Code
LYNCHBURG VA 24502

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

Name of Employer Occupation
FAIRFAX PUBLIC SCHOOLS EDUCATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: SA11AI.21363

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MR DENNIS WRIGHT 467

Mailing Address PO BOX 612

City State Zip Code
AVILLA IN 46710

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 12 / 2009

Transaction ID: SA11AI.21412

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	80917.00

**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 94 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) BASE CONNECT, INC.	Transaction ID: SB21B.4101 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="01"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - CREATIVE	<input type="text" value="753.10"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) BASE CONNECT, INC.	Transaction ID: SB21B.4102 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - CREATIVE	<input type="text" value="1583.42"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) BASE CONNECT, INC.	Transaction ID: SB21B.4103 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - CREATIVE	<input type="text" value="1727.62"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4064.14"/>
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)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial) BASE CONNECT, INC. <hr/> Mailing Address 1155 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL - CREATIVE Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4104 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 12327.30 Category/Type 003

B. Full Name (Last, First, Middle Initial) BASE CONNECT, INC. <hr/> Mailing Address 1155 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL - CREATIVE Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4105 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1841.93 Category/Type 003

C. Full Name (Last, First, Middle Initial) BASE CONNECT, INC. <hr/> Mailing Address 1155 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL - CREATIVE Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4106 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 1252.51 Category/Type 003

SUBTOTAL of Disbursements This Page (optional) ▶	15421.74
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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

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 MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4107</p> <p>Date of Disbursement 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 5162.70</p> <p>003 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4108</p> <p>Date of Disbursement 04 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 2868.36</p> <p>003 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4109</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 6013.24</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

14044.30

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

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 MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4110</p> <p>Date of Disbursement 05 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 4655.73</p> <p>003 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) BASE CONNECT, INC.</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL - CREATIVE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4111</p> <p>Date of Disbursement 06 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 5140.33</p> <p>003 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) CATTERTON PRINTING</p> <p>Mailing Address 100 POST OFFICE RD</p> <p>City WALDORF State MD Zip Code 20602</p> <p>Purpose of Disbursement DIRECT MAIL - PRINTING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4114</p> <p>Date of Disbursement 06 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 2225.00</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12021.06

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

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 MEMBER SENATE FUND

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4117</p> <p>Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 7298.19</p> <p>003 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4118</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 9355.18</p> <p>003 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4119</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 5471.99</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	22125.36
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

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 MEMBER SENATE FUND

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4120</p> <p>Date of Disbursement 02 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p>003 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4121</p> <p>Date of Disbursement 02 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 5685.57</p> <p>003 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4122</p> <p>Date of Disbursement 02 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 9012.71</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

17698.28

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

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 MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE	Transaction ID: SB21B.4123 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="02"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="25177.85"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE	Transaction ID: SB21B.4124 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="03"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="9000.00"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE	Transaction ID: SB21B.4125 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="4000.00"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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)

PAGE 101 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4126</p> <p>Date of Disbursement 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 22058.68</p> <p>003 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4127</p> <p>Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 2520.79</p> <p>003 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement direct mail fundraising</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4128</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 4166.75</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

28746.22

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 102 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4129</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 2 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4130</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 6792.22</p>
<p>C. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4131</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 3149.26</p>

SUBTOTAL of Disbursements This Page (optional) ▶

14941.48

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 103 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE <hr/> Mailing Address 1155 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL FUNDRAISING <hr/> Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4132 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 7867.86

B. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE <hr/> Mailing Address 1155 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL FUNDRAISING <hr/> Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4133 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 6985.45

C. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE <hr/> Mailing Address 1155 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL FUNDRAISING <hr/> Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4134 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 3000.00

SUBTOTAL of Disbursements This Page (optional) ▶	17853.31
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 104 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE <hr/> Mailing Address 1155 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL FUNDRAISING <hr/> Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4135 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 14052.41

B. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE <hr/> Mailing Address 1155 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL FUNDRAISING <hr/> Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4136 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 4804.60

C. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE <hr/> Mailing Address 1155 15TH STREET, NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement DIRECT MAIL FUNDRAISING <hr/> Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4137 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

23857.01

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 105 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4138</p> <p>Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 10687.86</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4139</p> <p>Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 3000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4140</p> <p>Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 3990.95</p>

SUBTOTAL of Disbursements This Page (optional) ►

17678.81

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 106 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS CORP	Transaction ID: SB21B.4143 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="02"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="218.62"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS CORP	Transaction ID: SB21B.4144 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="90.00"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS CORP	Transaction ID: SB21B.4145 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="03"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="2462.57"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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)

PAGE 107 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS CORP	Transaction ID: SB21B.4146 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="5771.78"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS CORP	Transaction ID: SB21B.4147 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="325.38"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS CORP	Transaction ID: SB21B.4148 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="06"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="1103.78"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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)

PAGE 108 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A.</p> <p>Full Name (Last, First, Middle Initial) CENTURY DATA SYSTEMS CORP</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DATA PROCESSING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4149</p> <p>Date of Disbursement 06 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1006.81</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) COLORTREE, INC. OF VIRGINIA</p> <p>Mailing Address 2519 BRITTONS HILL RD</p> <p>City RICHMOND State VA Zip Code 23230</p> <p>Purpose of Disbursement DIRECT MAIL - PRINTING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4157</p> <p>Date of Disbursement 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 9237.50</p> <p>003 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) COLORTREE, INC. OF VIRGINIA</p> <p>Mailing Address 2519 BRITTONS HILL RD</p> <p>City RICHMOND State VA Zip Code 23230</p> <p>Purpose of Disbursement DIRECT MAIL - PRINTING</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4158</p> <p>Date of Disbursement 06 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 2700.00</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12944.31

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

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 MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICES <hr/> Mailing Address 504 SHAW RD SUITE 206 <hr/> City STERLING State VA Zip Code 20166 <hr/> Purpose of Disbursement DIRECT MAIL - PRINTING Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4164 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 4165.42 Category/Type 003

B. Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICES <hr/> Mailing Address 504 SHAW RD SUITE 206 <hr/> City STERLING State VA Zip Code 20166 <hr/> Purpose of Disbursement DIRECT MAIL - PRINTING Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4165 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 1712.28 Category/Type 003

C. Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICES <hr/> Mailing Address 504 SHAW RD SUITE 206 <hr/> City STERLING State VA Zip Code 20166 <hr/> Purpose of Disbursement DIRECT MAIL - PRINTING Candidate Name REPUBLICAN MEMBER SENATE FUND <hr/> 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: SB21B.4166 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 7820.18 Category/Type 003

SUBTOTAL of Disbursements This Page (optional) ▶	13697.88
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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 112 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A.</p> <p>Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4170</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 78.85</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX DISCOUNT FEE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4171</p> <p>Date of Disbursement 01 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 6.83</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement MERCHANT SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4172</p> <p>Date of Disbursement 02 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 57.69</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

143.37

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

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 MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4173</p> <p>Date of Disbursement 02 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 207.98</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX DISCOUNT FEE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4174</p> <p>Date of Disbursement 02 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 137.65</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement MERCHANT SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4175</p> <p>Date of Disbursement 03 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 317.40</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	663.03
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

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 MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX COLLECTION FEE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4176 Date of Disbursement 03 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 4.95</p>
<p>B. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4177 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 151.35</p>
<p>C. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX DISCOUNT FEE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4178 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 32.02</p>

SUBTOTAL of Disbursements This Page (optional)	188.32
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

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 MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement MERCHANT SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4179</p> <p>Date of Disbursement MM / DD / YYYY 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 199.86</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement MISCELLANEOUS DEBIT</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4180</p> <p>Date of Disbursement MM / DD / YYYY 04 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 1.88</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement NET SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4181</p> <p>Date of Disbursement MM / DD / YYYY 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 151.56</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

353.30

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 116 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX DISCOUNT FEE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4182</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 36.21</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement MERCHANT SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4183</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 162.94</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX COLLECTION</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4184</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period 4.95</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	204.10
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

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 MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement NET SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4185</p> <p>Date of Disbursement 05 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 135.19</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX DISCOUNT FEE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4186</p> <p>Date of Disbursement 05 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 87.20</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement MERCHANT SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4187</p> <p>Date of Disbursement 06 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 122.25</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

344.64

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

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 MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement NET SERVICE CHARGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4188 Date of Disbursement 06 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 146.08</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX COLLECTION FEE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4189 Date of Disbursement 06 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4.95</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX DISCOUNT FEE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4190 Date of Disbursement 06 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 41.12</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

192.15

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 119 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) INTEGRAM	Transaction ID: SB21B.4193 Date of Disbursement
	Mailing Address 8421 HILLTOP RD	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - PRINTING	<input type="text" value="5267.77"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) LEGACY LISTS, INC.	Transaction ID: SB21B.4196 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="400.00"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) LEGACY LISTS, INC.	Transaction ID: SB21B.4197 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="02"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="1821.20"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7488.97"/>
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 120 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) LEGACY LISTS, INC.	Transaction ID: SB21B.4198 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="8307.16"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LEGACY LISTS, INC.	Transaction ID: SB21B.4199 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="2210.00"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LEGACY LISTS, INC.	Transaction ID: SB21B.4201 Date of Disbursement
	Mailing Address 1155 15TH STREET, NW SUITE 410	<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST RENTALS	<input type="text" value="411.62"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10928.78"/>
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)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) LEGACY LISTS, INC.</p> <p>Mailing Address 1155 15TH STREET, NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement LIST RENTALS</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4200</p> <p>Date of Disbursement 06 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>003 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) PATTON-KIEHL GROUP, INC.</p> <p>Mailing Address PO BOX 590</p> <p>City THORNBURG State VA Zip Code 22565</p> <p>Purpose of Disbursement DIRECT MAIL - MAILSHOP</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4204</p> <p>Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1354.36</p> <p>003 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) PATTON-KIEHL GROUP, INC.</p> <p>Mailing Address PO BOX 590</p> <p>City THORNBURG State VA Zip Code 22565</p> <p>Purpose of Disbursement DIRECT MAIL - MAILSHOP</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4205</p> <p>Date of Disbursement 04 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 6336.74</p> <p>003 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8191.10

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 122 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A.

Full Name (Last, First, Middle Initial)
PATTON-KIEHL GROUP, INC.

Transaction ID: SB21B.4206

Date of Disbursement

Mailing Address PO BOX 590

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	9		2	0	0	9

City THORNBURG State VA Zip Code 22565

Amount of Each Disbursement this Period

3080.02

Purpose of Disbursement
DIRECT MAIL - MAILSHOP

003
Category/ Type

Candidate Name
REPUBLICAN MEMBER SENATE FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
PATTON-KIEHL GROUP, INC.

Transaction ID: SB21B.4207

Date of Disbursement

Mailing Address PO BOX 590

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	9

City THORNBURG State VA Zip Code 22565

Amount of Each Disbursement this Period

2351.95

Purpose of Disbursement
DIRECT MAIL - MAILSHOP

003
Category/ Type

Candidate Name
REPUBLICAN MEMBER SENATE FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
SAGE CONSULTANTS

Transaction ID: SB21B.4234

Date of Disbursement

Mailing Address 2870 DOBIE RD

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	0	9

City MASON State MI Zip Code 48854

Amount of Each Disbursement this Period

3500.00

Purpose of Disbursement
BOOK KEEPING SERVICES

001
Category/ Type

Candidate Name
REPUBLICAN MEMBER SENATE FUND

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

8931.97

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

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 MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) STEVE GORDON & ASSOCIATES</p> <p>Mailing Address 507 CAPITOL COURT NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement LEGAL SERVICES</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4235 Date of Disbursement 04 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 8000.00</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) US POSTMASTER</p> <p>Mailing Address 1400 L STREET, NW LBBY 2</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement PO BOX RENEWAL</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4208 Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 495.00</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) US POSTMASTER</p> <p>Mailing Address 1400 L STREET, NW LBBY 2</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4237 Date of Disbursement 05 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 420.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8915.00

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 124 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A.</p> <p>Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU</p> <p>Mailing Address 4128 PEPSI PLACE</p> <p>City CHANTILLY State VA Zip Code 20151</p> <p>Purpose of Disbursement CREDIT CARD HOLDBACK</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4212</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 705.00</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU</p> <p>Mailing Address 4128 PEPSI PLACE</p> <p>City CHANTILLY State VA Zip Code 20151</p> <p>Purpose of Disbursement CAGING & ESCROW SERVICES</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4213</p> <p>Date of Disbursement 02 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1220.61</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU</p> <p>Mailing Address 4128 PEPSI PLACE</p> <p>City CHANTILLY State VA Zip Code 20151</p> <p>Purpose of Disbursement CAGING & ESCROW SERVICES</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4214</p> <p>Date of Disbursement 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 55.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1980.61

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 125 / 132

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU</p> <p>Mailing Address 4128 PEPSI PLACE</p> <p>City CHANTILLY State VA Zip Code 20151</p> <p>Purpose of Disbursement CAGING & ESCROW SERVICES</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4215</p> <p>Date of Disbursement 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 1196.60</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU</p> <p>Mailing Address 4128 PEPSI PLACE</p> <p>City CHANTILLY State VA Zip Code 20151</p> <p>Purpose of Disbursement CAGING & ESCROW SERVICES</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4216</p> <p>Date of Disbursement 04 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 2184.18</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU</p> <p>Mailing Address 4128 PEPSI PLACE</p> <p>City CHANTILLY State VA Zip Code 20151</p> <p>Purpose of Disbursement CAGING & ESCROW SERVICES</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB21B.4217</p> <p>Date of Disbursement 05 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 1813.75</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5194.53

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

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 MEMBER SENATE FUND

A.	Full Name (Last, First, Middle Initial) WEST END PRINTING CO	Transaction ID: SB21B.4220 Date of Disbursement
	Mailing Address 1609 SHERWOOD AVE	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City RICHMOND State VA Zip Code 23220	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - PRINTING	<input type="text" value="8452.50"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CHUCK YOB	Transaction ID: SB21B.4152 Date of Disbursement
	Mailing Address 8801 LEHMAN ST	<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City MONTAGUE State MI Zip Code 49437	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING - MANAGEMENT	<input type="text" value="1534.00"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CHUCK YOB	Transaction ID: SB21B.4154 Date of Disbursement
	Mailing Address 8801 LEHMAN ST	<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City MONTAGUE State MI Zip Code 49437	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING - MANAGEMENT	<input type="text" value="560.00"/>
	Candidate Name REPUBLICAN MEMBER SENATE FUND	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10546.50"/>
TOTAL This Period (last page this line number only)	<input type="text" value="351391.22"/>

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 127 / 132

<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

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 MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial) CITIZENS FOR BUNNING <hr/> Mailing Address 1717 DIXIE HIGHWAY SUITE 180 <hr/> City FT WRIGHT State KY Zip Code 41011 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name JIM BUNNING Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4236 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) JAY RIEMERSMA FOR CONGRESS <hr/> Mailing Address PO BOX 1467 <hr/> City HOLLAND State MI Zip Code 49492 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name ALLEN JAY RIEMERSMA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4233 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

<p>A. Full Name (Last, First, Middle Initial) BLACKWELL FOR CHAIRMAN</p> <p>Mailing Address 693 WINDINGS LANE</p> <p>City CINCINNATI State OH Zip Code 45220</p> <p>Purpose of Disbursement CONTRIBUTION TO CHAIRMAN'S COMMITTEE</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB29.4221</p> <p>Date of Disbursement 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 243.50</p> <p>012 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) CMTE TO ELECT BRIAN CALLEY</p> <p>Mailing Address PO BOX 30014</p> <p>City LANSING State MI Zip Code 48909</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB29.4239</p> <p>Date of Disbursement 06 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 499.00</p> <p>012 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) LONEGAN FOR GOVERNOR</p> <p>Mailing Address 335 JIMMIE LEEDS RD</p> <p>City GALLOWAY State NJ Zip Code 08205</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name REPUBLICAN MEMBER SENATE FUND</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: SB29.4238</p> <p>Date of Disbursement 05 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 3400.00</p> <p>012 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	4142.50
TOTAL This Period (last page this line number only)	4142.50

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 129 / 132
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT, INC.	Nature of Debt (Purpose): DIRECT MAIL - CREATIVE
Mailing Address 1155 15TH STREET, NW SUITE 410	
City State ZIP Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 46627.85	Transaction ID: SD10.21681	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 46627.85

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT, INC.	Nature of Debt (Purpose): DIRECT MAIL - CREATIVE
Mailing Address 1155 15TH STREET, NW SUITE 410	
City State ZIP Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4099	
Amount Incurred This Period 43326.24	Payment This Period 43326.24	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CATTERTON PRINTING	Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 100 POST OFFICE RD	
City State ZIP Code WALDORF MD 20602	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4112	
Amount Incurred This Period 2225.00	Payment This Period 2225.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	46627.85
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 130 / 132
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA MAILING SERVICE	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 1155 15TH STREET, NW SUITE 410	
City State ZIP Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4115	
Amount Incurred This Period 181078.32	Payment This Period 181078.32	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS CORP	Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 1155 15TH STREET, NW SUITE 410	
City State ZIP Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4141	
Amount Incurred This Period 10978.94	Payment This Period 10978.94	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE, INC. OF VIRGINIA	Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 2519 BRITTONS HILL RD	
City State ZIP Code RICHMOND VA 23230	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4155	
Amount Incurred This Period 11937.50	Payment This Period 11937.50	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICES	Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 504 SHAW RD SUITE 206	
City State ZIP Code STERLING VA 20166	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4159	
Amount Incurred This Period 36958.05	Payment This Period 36958.05	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM	Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 8421 HILLTOP RD	
City State ZIP Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4191	
Amount Incurred This Period 5267.77	Payment This Period 5267.77	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LISTS, INC.	Nature of Debt (Purpose): LIST RENTALS
Mailing Address 1155 15TH STREET, NW SUITE 410	
City State ZIP Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.4194	
Amount Incurred This Period 13649.98	Payment This Period 13649.98	Outstanding Balance at Close of This Period 0.00

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
REPUBLICAN MEMBER SENATE FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PATTON-KIEHL GROUP, INC.			Nature of Debt (Purpose): DIRECT MAIL - MAILSHOP
Mailing Address PO BOX 590			
City THORNBURG	State VA	ZIP Code 22565	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.4202	
Amount Incurred This Period 13123.07	Payment This Period 13123.07	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WASHINGTON INTELLIGENCE BUREAU			Nature of Debt (Purpose): CAGING & ESCROW SERVICES
Mailing Address 4128 PEPSI PLACE			
City CHANTILLY	State VA	ZIP Code 20151	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.4210	
Amount Incurred This Period 7175.14	Payment This Period 7175.14	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WEST END PRINTING CO			Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 1609 SHERWOOD AVE			
City RICHMOND	State VA	ZIP Code 23220	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.4218	
Amount Incurred This Period 8452.50	Payment This Period 8452.50	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
2) TOTALS This Period (last page this line number only).....	▶	46627.85
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)	▶	46627.85