

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5
BLACK REPUBLICAN PAC

ADDRESS (number and street) PO BOX 96613
Check if different than previously reported. (ACC) WASHINGTON DC 20090-6613

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00437053 3. IS THIS REPORT NEW (N) OR AMENDED (A) 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 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 07 / 01 / 2010 through 09 / 30 / 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer SCOTT B MACKENZIE [Electronically Filed] Date 04 / 11 / 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

BLACK REPUBLICAN PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2010"/>	<input type="text" value="23312.90"/>	<input type="text" value="23312.90"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15168.25"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="184067.70"/>	<input type="text" value="363599.97"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="199235.95"/>	<input type="text" value="386912.87"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="195818.13"/>	<input type="text" value="383495.05"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3417.82"/>	<input type="text" value="3417.82"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="94196.34"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BLACK REPUBLICAN PAC

Report Covering the Period: From: / / To: / /

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).....	43225.00	73468.16
(ii) Unitemized	140842.70	290131.81
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	184067.70	363599.97
(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)	184067.70	363599.97
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 Transfers (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))..... ▶	184067.70	363599.97
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	184067.70	363599.97

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	176318.13	357995.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	176318.13	357995.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	25500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	195818.13	383495.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	195818.13	383495.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	184067.70	363599.97
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	184067.70	363599.97
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	176318.13	357995.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	176318.13	357995.05

**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 6 OF 100
	<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)
BLACK REPUBLICAN PAC

A. MS RUTH ADLER 104
 Full Name (Last, First, Middle Initial)
 Mailing Address 5525 INDEPENDENCE AVE
 City BRONX State NY Zip Code 10471
 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 M / D D D / Y Y Y Y Y Y
 07 / 13 / 2010
Transaction ID : SA11AI.90347
 Amount of Each Receipt this Period
 250.00

B. MR CHARLES ALBERT 212
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 ROLAND CT
 City TOWSON State MD Zip Code 21204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2010
Transaction ID : SA11AI.90367
 Amount of Each Receipt this Period
 100.00

C. MR BILLY J ANDERSON 212
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 DURST ST
 City BALTIMORE State MD Zip Code 21230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FEDERAL DEPOSIT INSURANCE CORP FINANCE
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2010
Transaction ID : SA11AI.90452
 Amount of Each Receipt this Period
 25.00

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 7 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR BILLY J ANDERSON 212
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 DURST ST
 City Baltimore State MD Zip Code 21230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FEDERAL DEPOSIT INSURANCE CORP Occupation FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 11 / 2010
Transaction ID : SA11AI.90450
 Amount of Each Receipt this Period 100.00

B. MR BILLY J ANDERSON 212
 Full Name (Last, First, Middle Initial)
 Mailing Address 1115 DURST ST
 City Baltimore State MD Zip Code 21230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FEDERAL DEPOSIT INSURANCE CORP Occupation FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 09 / 13 / 2010
Transaction ID : SA11AI.90451
 Amount of Each Receipt this Period 50.00

C. MRS BARBARA ANDERSON 306
 Full Name (Last, First, Middle Initial)
 Mailing Address 1040 GRESHAMS FT
 City Greensboro State GA Zip Code 30642
 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 08 / 31 / 2010
Transaction ID : SA11AI.90441
 Amount of Each Receipt this Period 250.00

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 8 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS JOHN L ARMISTEAD 282 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 7113 CYPRESS CREEK LN
 City CHARLOTTE State NC Zip Code 28210
 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 M / D D D / Y Y Y Y Y Y
 09 / 30 / 2010
Transaction ID : SA11AI.90497
 Amount of Each Receipt this Period
 100.00

B. MR GARY H ARNOLD 222
 Full Name (Last, First, Middle Initial)
 Mailing Address 5133 1ST ST N
 City ARLINGTON State VA Zip Code 22203
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FREELANCE WRITER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2010
Transaction ID : SA11AI.90505
 Amount of Each Receipt this Period
 150.00

C. MR VICTOR ATKINS 931 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 50117
 City SANTA BARBARA State CA Zip Code 93150
 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 M / D D D / Y Y Y Y Y Y
 08 / 19 / 2010
Transaction ID : SA11AI.90521
 Amount of Each Receipt this Period
 250.00

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

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

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

FOR LINE NUMBER: PAGE 9 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)
A. MR BRUCE BABCOCK 613

Mailing Address 317 PALMOR DR

City State Zip Code
OTTAWA IL 61350

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2010
Transaction ID : SA11AI.90552

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. MR BRUCE BABCOCK 613

Mailing Address 317 PALMOR DR

City State Zip Code
OTTAWA IL 61350

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 ▼
258.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2010
Transaction ID : SA11AI.90555

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. MR BRUCE BABCOCK 613

Mailing Address 317 PALMOR DR

City State Zip Code
OTTAWA IL 61350

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 ▼
283.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 25 / 2010
Transaction ID : SA11AI.90554

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 125.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 100
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR JAMES H BAKER 617		Date of Receipt
Mailing Address 1906 OWENS DR		<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
City	State	Transaction ID : SA11AI.90600
BLOOMINGTON	IL	Amount of Each Receipt this Period
Zip Code		<input type="text" value="350.00"/>
61701		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="215.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR CECIL BARNETT 402		Date of Receipt
Mailing Address 126 INDIAN HILLS TRL		<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
City	State	Transaction ID : SA11AI.90650
LOUISVILLE	KY	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
40207		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
ALGOOD FOOD CO	PRESIDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR MAXWELL M BELDING 063		Date of Receipt
Mailing Address 28 SMITH NECK RD		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
City	State	Transaction ID : SA11AI.90794
OLD LYME	CT	Amount of Each Receipt this Period
Zip Code		<input type="text" value="250.00"/>
06371		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="385.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 11 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR HANS BERGSTROM 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 2612 SW 15TH ST
 City DEERFIELD BCH State FL Zip Code 33442
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation INDEPENDENT JOURNALIST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2010
Transaction ID : SA11AI.90847
 Amount of Each Receipt this Period
 250.00

B. DR CHESTER BEYER 751 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 577 POLLY RD
 City SUNNYVALE State TX Zip Code 75182
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SW ANESTHESIOLOGY Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 30 / 2010
Transaction ID : SA11AI.90882
 Amount of Each Receipt this Period
 200.00

C. MR OLIVER W BIVINS 791
 Full Name (Last, First, Middle Initial)
 Mailing Address 2028 S AUSTIN ST
 City AMARILLO State TX Zip Code 79109
 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 Y
 08 / 23 / 2010
Transaction ID : SA11AI.90920
 Amount of Each Receipt this Period
 300.00

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: (check only one)	PAGE 12 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. REV LLOYD M BOWDEN 604			Date of Receipt
Mailing Address 115 N MAY ST			<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.91053
JOLIET	IL	60435	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="100.00"/>
Name of Employer	Occupation		
SELF EMPLOYED	CLERGY		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR GUY BOWERS 883			Date of Receipt
Mailing Address PO BOX 8090			<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.91060
RUIDOSO	NM	88355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="1000.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MS FUMIE BOYCE 985			Date of Receipt
Mailing Address 4532 INTELCO LOOP SE APT 354			<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.91069
LACEY	WA	98503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="500.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1600.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 13 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JOHN BRAITHWAITE 788
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 144
 City EL INDIO State TX Zip Code 78860
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2010
Transaction ID : SA11AI.91093
 Amount of Each Receipt this Period
 250.00

B. MR JOHN BRANDT 557
 Full Name (Last, First, Middle Initial)
 Mailing Address 2129 12TH AVENUE E
 City HIBBING State MN Zip Code 55746
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2010
Transaction ID : SA11AI.91103
 Amount of Each Receipt this Period
 50.00

C. MRS VIRGINIA W BROWN 201
 Full Name (Last, First, Middle Initial)
 Mailing Address 828 VAN BUREN ST
 City HERNDON State VA Zip Code 20170
 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
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2010
Transaction ID : SA11AI.91184
 Amount of Each Receipt this Period
 375.00

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 14 OF 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR WILLIAM BROWN 607
Full Name (Last, First, Middle Initial)
Mailing Address 7029 W SEWARD ST
City NILES State IL Zip Code 60714
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
MM / DD / YYYY
09 / 23 / 2010
Transaction ID : SA11AI.91206
Amount of Each Receipt this Period
100.00

B. WILLIAM STEWART BUNDRICK 711
Full Name (Last, First, Middle Initial)
Mailing Address 8712 GLENMORA DR
City SHREVEPORT State LA Zip Code 71106
FEC ID number of contributing federal political committee. **C**
Name of Employer BONE AND JOINT CLINIC Occupation ORTHOPEDIC SURGEON
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2010
Transaction ID : SA11AI.91273
Amount of Each Receipt this Period
250.00

C. WILLIAM STEWART BUNDRICK 711
Full Name (Last, First, Middle Initial)
Mailing Address 8712 GLENMORA DR
City SHREVEPORT State LA Zip Code 71106
FEC ID number of contributing federal political committee. **C**
Name of Employer BONE AND JOINT CLINIC Occupation ORTHOPEDIC SURGEON
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
08 / 12 / 2010
Transaction ID : SA11AI.91274
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 15 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MRS KATHRYN G BURNEY 681		Date of Receipt
Mailing Address 9804 NICHOLAS ST		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
City	State	Zip Code
OMAHA	NE	68114
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.91300
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	
NONE	HOMEMAKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MRS JOANNA CHAMPLIN 731		Date of Receipt
Mailing Address 6325 HARDEN DR		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
City	State	Zip Code
OKLAHOMA CITY	OK	73118
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.91514
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MS SYDNEY R CHARLES 553		Date of Receipt
Mailing Address 1011 FELTL CT APT 803		<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
City	State	Zip Code
HOPKINS	MN	55343
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.91531
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="53.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="211.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="803.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 16 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MRS JEANNE C CIHA 436		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 23 / 2010 Transaction ID : SA11AI.91585
Mailing Address 1506 CRESTWOOD RD		Amount of Each Receipt this Period 40.00
City TOLEDO	State OH	Zip Code 43612
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 ▼ 240.00	

Full Name (Last, First, Middle Initial) B. MRS ELLOINE M CLARK 752		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 23 / 2010 Transaction ID : SA11AI.91595
Mailing Address 3716 MAPLEWOOD AVE		Amount of Each Receipt this Period 1000.00
City DALLAS	State TX	Zip Code 75205
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 ▼ 1100.00	

Full Name (Last, First, Middle Initial) C. MR CHARLES CLINTON 152 JR		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2010 Transaction ID : SA11AI.91635
Mailing Address 5103 MORNINGRISE DR		Amount of Each Receipt this Period 30.00
City PITTSBURGH	State PA	Zip Code 15236
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	

SUBTOTAL of Receipts This Page (optional).....▶	1070.00
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 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS ELEANOR COBB 900
 Full Name (Last, First, Middle Initial)
 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 Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2010
Transaction ID : SA11AI.91647
 Amount of Each Receipt this Period
 300.00

B. MRS ELIZABETH K COCHRAN 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 459 PASSAIC AVE APT 306
 City State Zip Code
 WEST CALDWELL NJ 07006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2010
Transaction ID : SA11AI.91648
 Amount of Each Receipt this Period
 775.00

C. MRS BETTY R CRAWFORD 527
 Full Name (Last, First, Middle Initial)
 Mailing Address 2505 IMPERIAL OAKS DR
 City State Zip Code
 MUSCATINE IA 52761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PLU MOR LANES BOWLING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2010
Transaction ID : SA11AI.91820
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1125.00
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 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JOHN CRAWFORD 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 20128 CHATEAU DR
 City SARATOGA State CA Zip Code 95070
 FEC ID number of contributing federal political committee. **C**
 Name of Employer INTEL CORP Occupation COMPUTER ARCHITECT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 19 / 2010
Transaction ID : SA11AI.91822
 Amount of Each Receipt this Period 500.00

B. MS MARION CUBBERLEY 088
 Full Name (Last, First, Middle Initial)
 Mailing Address 4302 MONROE VLG
 City MONROE TOWNSHIP State NJ Zip Code 08831
 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 07 / 22 / 2010
Transaction ID : SA11AI.91870
 Amount of Each Receipt this Period 150.00

C. MRS MARJORIE DAVIS 043
 Full Name (Last, First, Middle Initial)
 Mailing Address 6 HUCKLEBERRY LN
 City AUGUSTA State ME Zip Code 04330
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation NOT EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 09 / 10 / 2010
Transaction ID : SA11AI.91964
 Amount of Each Receipt this Period 1800.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2450.00
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 OF 100
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR MATTHEW S DESALVO 068

Full Name (Last, First, Middle Initial)
Mailing Address 52 DAWN HARBOR LN

City RIVERSIDE	State CT	Zip Code 06878
-------------------	-------------	-------------------

Date of Receipt: 08 / 16 / 2010
Transaction ID : SA11AI.92075

FEC ID number of contributing federal political committee: C

Amount of Each Receipt this Period: 250.00

Name of Employer: CREDIT SUISSE
Occupation: EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼: 250.00

B. MR JAMES C DOWDY 757

Full Name (Last, First, Middle Initial)
Mailing Address 2810 HOGAN CT

City TYLER	State TX	Zip Code 75709
---------------	-------------	-------------------

Date of Receipt: 09 / 17 / 2010
Transaction ID : SA11AI.92192

FEC ID number of contributing federal political committee: C

Amount of Each Receipt this Period: 1000.00

Name of Employer: NONE
Occupation: RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼: 1000.00

C. CAPT JOHN DRAIN 221

Full Name (Last, First, Middle Initial)
Mailing Address 1703 WARNER AVE

City MC LEAN	State VA	Zip Code 22101
-----------------	-------------	-------------------

Date of Receipt: 08 / 24 / 2010
Transaction ID : SA11AI.92206

FEC ID number of contributing federal political committee: C

Amount of Each Receipt this Period: 55.00

Name of Employer: US MILITARY
Occupation: OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼: 244.00

SUBTOTAL of Receipts This Page (optional).....▶	1305.00
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 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. CAPT JOHN DRAIN 221		Date of Receipt
Mailing Address 1703 WARNER AVE		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
City	State	Zip Code
MC LEAN	VA	22101
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.92203
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
US MILITARY	OFFICER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="269.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR WESLEY H EATON 019		Date of Receipt
Mailing Address 304 BROOKSBY VILLAGE DR UNIT 308		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
City	State	Zip Code
PEABODY	MA	01960
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.92299
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR RONALD ELLIS 112		Date of Receipt
Mailing Address 2340 E 17TH ST		<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
City	State	Zip Code
BROOKLYN	NY	11229
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.92369
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="330.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="375.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 21 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR RONALD ELLIS 112		Date of Receipt
Mailing Address 2340 E 17TH ST		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
City	State	Zip Code
BROOKLYN	NY	11229
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.92368
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="380.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR STEVEN J ELLIS 282		Date of Receipt
Mailing Address 544 N CHURCH ST		<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
City	State	Zip Code
CHARLOTTE	NC	28202
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.92371
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
WELLS FARGO & COMPANY	EXECUTIVE VICE PRESIDENT	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. DR JOHN R FISHER 441 MD		Date of Receipt
Mailing Address 3170 W 52ND ST		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
City	State	Zip Code
CLEVELAND	OH	44102
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.92570
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
UNIV HOSP OF CLEVELAND	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="450.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 22 OF 100
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MISS EILEEN M FORD 117
Full Name (Last, First, Middle Initial)
Mailing Address 3662 IONIA ST
City SEAFORD State NY Zip Code 11783
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation NOT EMPLOYED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 02 / 2010
Transaction ID : SA11AI.92621
Amount of Each Receipt this Period 50.00

B. MS VICTORIA I FORD 322
Full Name (Last, First, Middle Initial)
Mailing Address 4303 FOREST PARK RD
City JACKSONVILLE State FL Zip Code 32210
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 09 / 08 / 2010
Transaction ID : SA11AI.92625
Amount of Each Receipt this Period 100.00

C. MR ERNEST V FORTIN 342
Full Name (Last, First, Middle Initial)
Mailing Address 4574 HIGHLAND OAKS CIR
City SARASOTA State FL Zip Code 34235
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 09 / 23 / 2010
Transaction ID : SA11AI.92632
Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
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 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR MARION M FRANK 448
 Full Name (Last, First, Middle Initial)
 Mailing Address 6948 TOWNSHIP ROAD 451
 City LOUDONVILLE State OH Zip Code 44842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2010
Transaction ID : SA11AI.92669
 Amount of Each Receipt this Period
 200.00

B. MRS LEAH FRANKEL 334
 Full Name (Last, First, Middle Initial)
 Mailing Address 478 MARINER DR
 City JUPITER State FL Zip Code 33477
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2010
Transaction ID : SA11AI.92670
 Amount of Each Receipt this Period
 250.00

C. MRS IRENE FULTON 940
 Full Name (Last, First, Middle Initial)
 Mailing Address 12238 COLINA DR
 City LOS ALTOS HILLS State CA Zip Code 94024
 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 ▼ 238.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.92726
 Amount of Each Receipt this Period
 50.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. DARRELL GARNER 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 605 FILBERT CT
 City SAN RAMON State CA Zip Code 94583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2010
Transaction ID : SA11AI.92777
 Amount of Each Receipt this Period
 25.00

B. DARRELL GARNER 945
 Full Name (Last, First, Middle Initial)
 Mailing Address 605 FILBERT CT
 City SAN RAMON State CA Zip Code 94583
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation INSURANCE AGENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2010
Transaction ID : SA11AI.92776
 Amount of Each Receipt this Period
 25.00

C. MS RUTH GEALY 693
 Full Name (Last, First, Middle Initial)
 Mailing Address 1978 690TH RD
 City GORDON State NE Zip Code 69343
 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
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2010
Transaction ID : SA11AI.92794
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MS RUTH GEALY 693
 Full Name (Last, First, Middle Initial)
 Mailing Address 1978 690TH RD
 City GORDON State NE Zip Code 69343
 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 08 / 30 / 2010
Transaction ID : SA11AI.92795
 Amount of Each Receipt this Period 75.00

B. MS JANE F GELDERMANN 600
 Full Name (Last, First, Middle Initial)
 Mailing Address 1410 SHERIDAN RD APT 5D
 City WILMETTE State IL Zip Code 60091
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 16 / 2010
Transaction ID : SA11AI.92807
 Amount of Each Receipt this Period 100.00

C. MR CHARLES F GORDER 921 SR
 Full Name (Last, First, Middle Initial)
 Mailing Address 5526 TOYON RD
 City SAN DIEGO State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALHADEFF & SOLAR L.L.P Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2010
Transaction ID : SA11AI.92965
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 275.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 26 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR CHARLES F GORDER 921 SR
 Full Name (Last, First, Middle Initial)
 Mailing Address 5526 TOYON RD
 City SAN DIEGO State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALHADEFF & SOLAR L.L.P Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2010
Transaction ID : SA11AI.92964
 Amount of Each Receipt this Period
 100.00

B. MR CHARLES F GORDER 921 SR
 Full Name (Last, First, Middle Initial)
 Mailing Address 5526 TOYON RD
 City SAN DIEGO State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALHADEFF & SOLAR L.L.P Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2010
Transaction ID : SA11AI.92963
 Amount of Each Receipt this Period
 100.00

C. MR CHARLES F GORDER 921 SR
 Full Name (Last, First, Middle Initial)
 Mailing Address 5526 TOYON RD
 City SAN DIEGO State CA Zip Code 92115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ALHADEFF & SOLAR L.L.P Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2010
Transaction ID : SA11AI.92966
 Amount of Each Receipt this Period
 100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR DONALD GUMPERS 916		Date of Receipt
Mailing Address PO BOX 2450		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
City	State	Zip Code
TOLUCA LAKE	CA	91610
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.93109
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) B. MR HAROLD H HARMS 510		Date of Receipt
Mailing Address PO BOX 78		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
City	State	Zip Code
BRUNSVILLE	IA	51008
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.93279
Name of Employer	Occupation	Amount of Each Receipt this Period
IOWA PRAIRIE BANK	BANK EMPLOYEE	<input type="text" value="50.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. MRS SALLIE M HAYES 794		Date of Receipt
Mailing Address 6102 8TH DR		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
City	State	Zip Code
LUBBOCK	TX	79416
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.93349
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="205.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="575.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 28 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS ELLA M HELM 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 3385 HALLMARK DR SE
 City MARIETTA State GA Zip Code 30067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2010
Transaction ID : SA11AI.93383
 Amount of Each Receipt this Period
 75.00

B. MRS ELLA M HELM 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 3385 HALLMARK DR SE
 City MARIETTA State GA Zip Code 30067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2010
Transaction ID : SA11AI.93381
 Amount of Each Receipt this Period
 100.00

C. MRS ELLA M HELM 300
 Full Name (Last, First, Middle Initial)
 Mailing Address 3385 HALLMARK DR SE
 City MARIETTA State GA Zip Code 30067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2010
Transaction ID : SA11AI.93382
 Amount of Each Receipt this Period
 75.00

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: (check only one)	PAGE 29 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MS FLORENCE HOOTEN 207		Date of Receipt
Mailing Address 7017 SAINT ANNES AVE		<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
City	State	Zip Code
LANHAM	MD	20706
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.93570
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="290.00"/>	

Full Name (Last, First, Middle Initial) B. MR WILLIAM JACKY 891		Date of Receipt
Mailing Address 8332 FAWN BROOK CT		<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
City	State	Zip Code
LAS VEGAS	NV	89149
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.93746
Name of Employer	Occupation	Amount of Each Receipt this Period
NONE	RETIRED	<input type="text" value="38.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="207.00"/>	

Full Name (Last, First, Middle Initial) C. DR JEANNE JAGGARD 074 MD		Date of Receipt
Mailing Address 16 APACHE RD		<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
City	State	Zip Code
WAYNE	NJ	07470
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.93759
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF EMPLOYED	PHYSICIAN	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="363.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. DR JEANNE JAGGARD 074 MD		Date of Receipt
Mailing Address 16 APACHE RD		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
City	State	Zip Code
WAYNE	NJ	07470
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.93760
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
SELF EMPLOYED	PHYSICIAN	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR JAMES JAKOBEK 024		Date of Receipt
Mailing Address 50 BURR DR		<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
City	State	Zip Code
NEEDHAM	MA	02492
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.93764
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR HENRY JEZEK 765		Date of Receipt
Mailing Address 3819 CHISHOLM TRL		<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
City	State	Zip Code
TEMPLE	TX	76504
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.93806
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 31 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS MARIE-LUISE KALSI 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 13307 CAROUSEL CT
 City HOUSTON State TX Zip Code 77041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2010
Transaction ID : SA11AI.93955
 Amount of Each Receipt this Period
 100.00

B. MRS MARIE-LUISE KALSI 770
 Full Name (Last, First, Middle Initial)
 Mailing Address 13307 CAROUSEL CT
 City HOUSTON State TX Zip Code 77041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 16 / 2010
Transaction ID : SA11AI.93954
 Amount of Each Receipt this Period
 100.00

C. MISS LINDA KENDALL 330
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 CLUB HOUSE RD
 City KEY LARGO State FL Zip Code 33037
 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 Y
 07 / 12 / 2010
Transaction ID : SA11AI.94045
 Amount of Each Receipt this Period
 500.00

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: (check only one)	PAGE 32 OF 100
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MRS LINDA G KENDALL 941			Date of Receipt
Mailing Address 2151 LAGUNA ST			<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.94046
SAN FRANCISCO	CA	94115	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="500.00"/>
Name of Employer	Occupation		
NONE	HOMEMAKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1500.00"/>		

Full Name (Last, First, Middle Initial) B. DR JOHN G KIDD 019 MD			Date of Receipt
Mailing Address 118 MAIN ST			<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.94068
TOPSFIELD	MA	01983	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
DUTTON FAMILY CARE	PHYSICIAN		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>		

Full Name (Last, First, Middle Initial) C. THOMAS W KIMMEL 477			Date of Receipt
Mailing Address 3530 W BOONVILLE NEW HARMONY RD			<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.94089
EVANSVILLE	IN	47720	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 33 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR LEONARD M KIRK 210
 Full Name (Last, First, Middle Initial)
 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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2010
Transaction ID : SA11AI.94116
 Amount of Each Receipt this Period
 100.00

B. MR WALTER H KLEINER 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 1725 89TH PL NE
 City State Zip Code
 CLYDE HILL WA 98004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2010
Transaction ID : SA11AI.94134
 Amount of Each Receipt this Period
 250.00

C. MR WALTER H KLEINER 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 1725 89TH PL NE
 City State Zip Code
 CLYDE HILL WA 98004
 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 ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2010
Transaction ID : SA11AI.94133
 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 34 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)
A. MR DONALD KORTEBEIN 532

Mailing Address 3838 N OAKLAND AVE APT 366

City State Zip Code
MILWAUKEE WI 53211

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 M / D D D / Y Y Y Y Y Y
 08 / 16 / 2010
Transaction ID : SA11AI.94207

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. MR ROBERT KRAMER 342

Mailing Address 1233 N GULFSTREAM AVE UNIT 140

City State Zip Code
SARASOTA FL 34236

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 M / D D D / Y Y Y Y Y Y
 08 / 24 / 2010
Transaction ID : SA11AI.94222

Amount of Each Receipt this Period
100.00

Full Name (Last, First, Middle Initial)
C. MR ROBERT KRAMER 342

Mailing Address 1233 N GULFSTREAM AVE UNIT 140

City State Zip Code
SARASOTA FL 34236

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 M / D D D / Y Y Y Y Y Y
 09 / 20 / 2010
Transaction ID : SA11AI.94223

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: (check only one)	PAGE 35 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MISS EVELINA F KROUT 968		Date of Receipt
Mailing Address 2124 HAKANU ST		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
City	State	Zip Code
HONOLULU	HI	96821
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.94250
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="325.00"/>	<input type="text" value="150.00"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR THOMAS F KYLE 130 III		Date of Receipt
Mailing Address 215 SUMMERHAVEN DR S		<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
City	State	Zip Code
EAST SYRACUSE	NY	13057
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.94285
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	<input type="text" value="175.00"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR WALTER LAKE 933		Date of Receipt
Mailing Address PO BOX 2248		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
City	State	Zip Code
BAKERSFIELD	CA	93303
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.94314
RAIN FOR RENT	VICE PRESIDENT	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="1325.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 36 OF 100
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MISS BELINA L LAZZAR 920

Mailing Address PO BOX 8686

City RANCHO SANTA FE	State CA	Zip Code 92067
-------------------------	-------------	-------------------

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: **09 / 14 / 2010**
Transaction ID : SA11AI.94391

Amount of Each Receipt this Period: **150.00**

B. FRANCES LEMAY 468

Mailing Address 712 W FAIRFAX AVE

City FORT WAYNE	State IN	Zip Code 46807
--------------------	-------------	-------------------

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: **09 / 23 / 2010**
Transaction ID : SA11AI.94443

Amount of Each Receipt this Period: **150.00**

C. MS MARIE J LETT 760

Mailing Address 3940 LETT LN

City BURLESON	State TX	Zip Code 76028
------------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation RANCHER
-----------------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2700.00**

Date of Receipt: **09 / 30 / 2010**
Transaction ID : SA11AI.94470

Amount of Each Receipt this Period: **500.00**

SUBTOTAL of Receipts This Page (optional).....▶	800.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 37 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR PAUL LINTHORST 105
 Full Name (Last, First, Middle Initial)
 Mailing Address 19 HUNTWOOD PL
 City MOUNT VERNON State NY Zip Code 10552
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PRICE WATERHOUSE COOPERS Occupation MANAGEMENT CONSULTANT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 08 / 18 / 2010
Transaction ID : SA11AI.94512
 Amount of Each Receipt this Period 100.00

B. MR ROBERT D C LONG 299
 Full Name (Last, First, Middle Initial)
 Mailing Address 47 SAVANNAH TRL
 City HILTON HEAD ISLAND State SC Zip Code 29926
 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 08 / 10 / 2010
Transaction ID : SA11AI.94545
 Amount of Each Receipt this Period 100.00

C. MRS YVONNE M LYON 346
 Full Name (Last, First, Middle Initial)
 Mailing Address 3025 LEPRECHAUN LN
 City PALM HARBOR State FL Zip Code 34683
 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 09 / 21 / 2010
Transaction ID : SA11AI.94621
 Amount of Each Receipt this Period 100.00

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

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

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

FOR LINE NUMBER: PAGE 38 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR CHARLES MATTHEWS 600			Date of Receipt MM / DD / YYYY 08 / 30 / 2010 Transaction ID : SA11AI.94789
Mailing Address 321 GRAND AVE			Amount of Each Receipt this Period 250.00
City WAUKEGAN	State IL	Zip Code 60085	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 350.00	
Name of Employer MATTHEWS EMPLOYMENT INC		Occupation BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR PAUL J MCGOLDRICK 035			Date of Receipt MM / DD / YYYY 09 / 20 / 2010 Transaction ID : SA11AI.94887
Mailing Address 106 MAIN ST BOX 439			Amount of Each Receipt this Period 250.00
City LITTLETON	State NH	Zip Code 03561	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00	
Name of Employer SELF EMPLOYED		Occupation FINANCIAL ADVISER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR PAUL J MCGOLDRICK 035			Date of Receipt MM / DD / YYYY 09 / 20 / 2010 Transaction ID : SA11AI.94888
Mailing Address 106 MAIN ST BOX 439			Amount of Each Receipt this Period 250.00
City LITTLETON	State NH	Zip Code 03561	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00	
Name of Employer SELF EMPLOYED		Occupation FINANCIAL ADVISER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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 39 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR BRENT W MEADOWS 744
 Full Name (Last, First, Middle Initial)
 Mailing Address 12498 S 305TH EAST AVE
 City COWETA State OK Zip Code 74429
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KAISER-FRANER ANADINTRO LLC Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.94976
 Amount of Each Receipt this Period
 100.00

B. CAPT RICHARDS T MILLER 214
 Full Name (Last, First, Middle Initial)
 Mailing Address 7101 BAY FRONT DR APT 316
 City ANNAPOLIS State MD Zip Code 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US NAVY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2010
Transaction ID : SA11AI.95072
 Amount of Each Receipt this Period
 100.00

C. CAPT RICHARDS T MILLER 214
 Full Name (Last, First, Middle Initial)
 Mailing Address 7101 BAY FRONT DR APT 316
 City ANNAPOLIS State MD Zip Code 21403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US NAVY Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2010
Transaction ID : SA11AI.95073
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. DR THOMAS MIMS 770 MD			Date of Receipt
Mailing Address 1655 BANKS ST			<input type="text" value="08"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.95097
HOUSTON	TX	77006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="200.00"/>
Name of Employer	Occupation		
SELF EMPLOYED	PHYSICIAN		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR DANIEL S MONACO 151			Date of Receipt
Mailing Address 533 ALLEGHENY AVE			<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.95146
OAKMONT	PA	15139	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="45.00"/>
Name of Employer	Occupation		
SELF EMPLOYED	RESTAURANT OWNER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="265.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR ROBERT L MOORE 441			Date of Receipt
Mailing Address 20549 BYRON RD			<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.95176
SHAKER HEIGHTS	OH	44122	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="250.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="495.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JOSEPH MOOREIII 853
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 5132
 City SUN CITY WEST State AZ Zip Code 85376
 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 M / D D D / Y Y Y Y Y Y
 08 / 09 / 2010
Transaction ID : SA11AI.95195
 Amount of Each Receipt this Period
 300.00

B. I A MORRIS 144
 Full Name (Last, First, Middle Initial)
 Mailing Address 2867 OUTLET RD
 City CLIFTON SPRINGS State NY Zip Code 14432
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GW LISK CO INC Occupation ENGINEER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2010
Transaction ID : SA11AI.95218
 Amount of Each Receipt this Period
 1000.00

C. MS CHELI MYERS 750
 Full Name (Last, First, Middle Initial)
 Mailing Address 14818 SOPRAS CIR
 City ADDISON State TX Zip Code 75001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer WRIGHTSON, JOHNSON, HADDON & W Occupation MANAGER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.95316
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional).....▶	1325.00
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 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR WILLIAM J MYHRE 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 865 2ND AVE
 City SWEET HOME State OR Zip Code 97386
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2010
Transaction ID : SA11AI.95319
 Amount of Each Receipt this Period
 100.00

B. MR WILLIAM J MYHRE 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 865 2ND AVE
 City SWEET HOME State OR Zip Code 97386
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2010
Transaction ID : SA11AI.95318
 Amount of Each Receipt this Period
 200.00

C. MR WILLIAM J MYHRE 973
 Full Name (Last, First, Middle Initial)
 Mailing Address 865 2ND AVE
 City SWEET HOME State OR Zip Code 97386
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 27 / 2010
Transaction ID : SA11AI.95317
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. KAREN A NELSON 999		Date of Receipt
Mailing Address PO BOX 9103		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
City	State	Transaction ID : SA11AI.95354
KETCHIKAN	AK	Amount of Each Receipt this Period
Zip Code		<input type="text" value="250.00"/>
99901		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF EMPLOYED	TUTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR RONALD A NEVILLE 658		Date of Receipt
Mailing Address 3541 E KINGSWOOD DR		<input type="text" value="08"/> / <input type="text" value="16"/> / <input type="text" value="2010"/>
City	State	Transaction ID : SA11AI.95375
SPRINGFIELD	MO	Amount of Each Receipt this Period
Zip Code		<input type="text" value="250.00"/>
65809		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF EMPLOYED	INVESTOR	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR PHILLIP NICOZISIS 334		Date of Receipt
Mailing Address 301 CLEMATIS ST		<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
City	State	Transaction ID : SA11AI.95397
WEST PALM BCH	FL	Amount of Each Receipt this Period
Zip Code		<input type="text" value="100.00"/>
33401		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
SELF EMPLOYED	REAL ESTATE	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="600.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 100
	<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)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR JOHN NIKKEL 741		Date of Receipt
Mailing Address 6625 S JAMESTOWN AVE		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
City	State	Zip Code
TULSA	OK	74136
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.95410
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR RAY P ODEN 711 JR		Date of Receipt
Mailing Address 702 THORA BLVD		<input type="text" value="08"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
City	State	Zip Code
SHREVEPORT	LA	71106
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.95480
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR RAY P ODEN 711 JR		Date of Receipt
Mailing Address 702 THORA BLVD		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
City	State	Zip Code
SHREVEPORT	LA	71106
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.95479
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="3000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3250.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 45 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. REV EDMUND W OLIFIERS 209 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2129 BUCKNELL TER
 City SILVER SPRING State MD Zip Code 20902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CLERGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 09 / 2010
Transaction ID : SA11AI.95500
 Amount of Each Receipt this Period
 250.00

B. REV EDMUND W OLIFIERS 209 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2129 BUCKNELL TER
 City SILVER SPRING State MD Zip Code 20902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CLERGY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2010
Transaction ID : SA11AI.95499
 Amount of Each Receipt this Period
 100.00

C. MR ROBERT OWEN 804
 Full Name (Last, First, Middle Initial)
 Mailing Address 32743 UPPER BEAR CREEK RD
 City EVERGREEN State CO Zip Code 80439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2010
Transaction ID : SA11AI.95556
 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 46 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR ROBERT OWEN 804
 Full Name (Last, First, Middle Initial)
 Mailing Address 32743 UPPER BEAR CREEK RD
 City EVERGREEN State CO Zip Code 80439
 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 Y
 09 / 07 / 2010
Transaction ID : SA11AI.95555
 Amount of Each Receipt this Period
 50.00

B. MISS EDITH P PALMER 109
 Full Name (Last, First, Middle Initial)
 Mailing Address 282 LAROE RD
 City CHESTER State NY Zip Code 10918
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation HOMEMAKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.95580
 Amount of Each Receipt this Period
 250.00

C. MR JAMES PANKONIEN 537
 Full Name (Last, First, Middle Initial)
 Mailing Address 2313 GOLD DR
 City FITCHBURG State WI Zip Code 53711
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2010
Transaction ID : SA11AI.95596
 Amount of Each Receipt this Period
 75.00

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 47 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JOHN PENSON 752
 Full Name (Last, First, Middle Initial)
 Mailing Address 3756 ARMSTRONG AVE
 City DALLAS State TX Zip Code 75205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PENSON PROPERTIES INC Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2010
Transaction ID : SA11AI.95699
 Amount of Each Receipt this Period
 200.00

B. LTC STEPHEN PERCY 063
 Full Name (Last, First, Middle Initial)
 Mailing Address 14 NEW SHORE RD
 City WATERFORD State CT Zip Code 06385
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US MARINE CORPS Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2010
Transaction ID : SA11AI.95701
 Amount of Each Receipt this Period
 50.00

C. MRS MARIE PERO 980
 Full Name (Last, First, Middle Initial)
 Mailing Address 3037 122ND PL NE
 City BELLEVUE State WA Zip Code 98005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 01 / 2010
Transaction ID : SA11AI.95709
 Amount of Each Receipt this Period
 200.00

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 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR DUWAYNE PETERSON 553		Date of Receipt
Mailing Address 1215 W SHORE DR SW		M M M / D D D / Y Y Y Y Y Y 08 / 17 / 2010
City HUTCHINSON	State MN	Zip Code 55350
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.95727
Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 250.00
Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. MR GLENN PICKETT 596		Date of Receipt
Mailing Address 701 COLE AVE		M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2010
City HELENA	State MT	Zip Code 59601
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.95769
Name of Employer NONE		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 50.00
Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. MR GLENN PICKETT 596		Date of Receipt
Mailing Address 701 COLE AVE		M M M / D D D / Y Y Y Y Y Y 08 / 26 / 2010
City HELENA	State MT	Zip Code 59601
FEC ID number of contributing federal political committee. C		Transaction ID : SA11AI.95770
Name of Employer NONE		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 15.00
Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional).....▶	315.00
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 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR GLENN PICKETT 596
 Full Name (Last, First, Middle Initial)
 Mailing Address 701 COLE AVE
 City HELENA State MT Zip Code 59601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.95772
 Amount of Each Receipt this Period
 50.00

B. DALLAS PRYOR 748
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 64
 City HOLDENVILLE State OK Zip Code 74848
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation OILFIELD
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2010
Transaction ID : SA11AI.95910
 Amount of Each Receipt this Period
 300.00

C. LENORA PUSTA 855
 Full Name (Last, First, Middle Initial)
 Mailing Address 138 W SUNFLOWER DR
 City PAYSON State AZ Zip Code 85541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 19 / 2010
Transaction ID : SA11AI.95926
 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 50 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR LLOYD B PUTMAN 826
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1655
 City Mills State WY Zip Code 82644
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 22 / 2010
Transaction ID : SA11AI.95928
 Amount of Each Receipt this Period
 50.00

B. MR LLOYD B PUTMAN 826
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 1655
 City Mills State WY Zip Code 82644
 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 M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.95927
 Amount of Each Receipt this Period
 50.00

C. MISS BEATRICE R PUTNAM 050
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 PUTNAM RD
 City NEWBURY State VT Zip Code 05051
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 24 / 2010
Transaction ID : SA11AI.95931
 Amount of Each Receipt this Period
 75.00

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

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

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

FOR LINE NUMBER: PAGE 51 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MISS BEATRICE R PUTNAM 050
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 PUTNAM RD
 City NEWBURY State VT Zip Code 05051
 Date of Receipt 09 / 14 / 2010
 Transaction ID : SA11AI.95929
 Amount of Each Receipt this Period 75.00
 Aggregate Year-to-Date 450.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼

B. MISS BEATRICE R PUTNAM 050
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 PUTNAM RD
 City NEWBURY State VT Zip Code 05051
 Date of Receipt 09 / 24 / 2010
 Transaction ID : SA11AI.95930
 Amount of Each Receipt this Period 75.00
 Aggregate Year-to-Date 525.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼

C. MS CLAIRE RAINS 941
 Full Name (Last, First, Middle Initial)
 Mailing Address 420 41ST AVE
 City SAN FRANCISCO State CA Zip Code 94121
 Date of Receipt 08 / 24 / 2010
 Transaction ID : SA11AI.95966
 Amount of Each Receipt this Period 35.00
 Aggregate Year-to-Date 220.00
 FEC ID number of contributing federal political committee. C
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼

SUBTOTAL of Receipts This Page (optional)..... ▶ 185.00
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 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. DR V BIRCH RAMBO 294 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 W 9TH NORTH ST UNIT 157
 City State Zip Code
 SUMMERVILLE SC 29483
 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 ▼
 221.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2010
Transaction ID : SA11AI.95971
 Amount of Each Receipt this Period
 60.00

B. DR V BIRCH RAMBO 294 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 201 W 9TH NORTH ST UNIT 157
 City State Zip Code
 SUMMERVILLE SC 29483
 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 ▼
 298.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2010
Transaction ID : SA11AI.95970
 Amount of Each Receipt this Period
 77.00

C. R REAVES 927
 Full Name (Last, First, Middle Initial)
 Mailing Address 10831 SKYLINE 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 ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2010
Transaction ID : SA11AI.96027
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 287.00
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 OF 100
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 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)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR MICHAEL S REAVEY 173		Date of Receipt
Mailing Address 200 LONGVIEW BLVD		<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
City	State	Zip Code
GETTYSBURG	PA	17325
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.96030
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR MICHAEL S REAVEY 173		Date of Receipt
Mailing Address 200 LONGVIEW BLVD		<input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
City	State	Zip Code
GETTYSBURG	PA	17325
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.96029
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MRS CAROL J REUTER 112		Date of Receipt
Mailing Address 8201 4TH AVE		<input type="text" value="09"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
City	State	Zip Code
BROOKLYN	NY	11209
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.96094
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="201.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="200.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 54 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR LYNN A REVAK 775
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 BAY HARBOR DR
 City LA PORTE State TX Zip Code 77571
 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 M / D D D / Y Y Y Y Y Y
 08 / 30 / 2010
Transaction ID : SA11AI.96099
 Amount of Each Receipt this Period
 100.00

B. MR DONALD B RICE 900
 Full Name (Last, First, Middle Initial)
 Mailing Address 10126 EMPYREAN WAY APT 103
 City LOS ANGELES State CA Zip Code 90067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer AGENSYS, INC Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2010
Transaction ID : SA11AI.96127
 Amount of Each Receipt this Period
 1000.00

C. MS M RICHARDSON 288
 Full Name (Last, First, Middle Initial)
 Mailing Address 1617 HENDERSONVILLE RD
 City ASHEVILLE State NC Zip Code 28803
 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 M / D D D / Y Y Y Y Y Y
 07 / 19 / 2010
Transaction ID : SA11AI.96144
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00
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 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MS M RICHARDSON 288
 Full Name (Last, First, Middle Initial)
 Mailing Address 1617 HENDERSONVILLE RD
 City ASHEVILLE State NC Zip Code 28803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2010
Transaction ID : SA11AI.96147
 Amount of Each Receipt this Period
 100.00

B. MS M RICHARDSON 288
 Full Name (Last, First, Middle Initial)
 Mailing Address 1617 HENDERSONVILLE RD
 City ASHEVILLE State NC Zip Code 28803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 19 / 2010
Transaction ID : SA11AI.96146
 Amount of Each Receipt this Period
 50.00

C. MS M RICHARDSON 288
 Full Name (Last, First, Middle Initial)
 Mailing Address 1617 HENDERSONVILLE RD
 City ASHEVILLE State NC Zip Code 28803
 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
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.96145
 Amount of Each Receipt this Period
 250.00

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 56 OF 100
(check only one)	
<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"/>	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. KATHLEEN M ROBE 926
 Full Name (Last, First, Middle Initial)
 Mailing Address 2851 CAROB ST
 City NEWPORT BEACH State CA Zip Code 92660
 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
 M M M / D D D / Y Y Y Y Y Y
 08 / 18 / 2010
Transaction ID : SA11AI.96216
 Amount of Each Receipt this Period
 50.00

B. KATHLEEN M ROBE 926
 Full Name (Last, First, Middle Initial)
 Mailing Address 2851 CAROB ST
 City NEWPORT BEACH State CA Zip Code 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 16 / 2010
Transaction ID : SA11AI.96215
 Amount of Each Receipt this Period
 100.00

C. KATHLEEN M ROBE 926
 Full Name (Last, First, Middle Initial)
 Mailing Address 2851 CAROB ST
 City NEWPORT BEACH State CA Zip Code 92660
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2010
Transaction ID : SA11AI.96214
 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: (check only one)	PAGE 57 OF 100
	<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)
BLACK REPUBLICAN PAC

A. MR FREDERICK ROSS 070

Full Name (Last, First, Middle Initial)
Mailing Address 47 HATHAWAY LN

City ESSEX FELLS State NJ Zip Code 07021

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

Name of Employer SELF EMPLOYED Occupation BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **800.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 30 / 2010
Transaction ID : SA11AI.96355

Amount of Each Receipt this Period
600.00

B. MR FREDERICK ROSS 070

Full Name (Last, First, Middle Initial)
Mailing Address 47 HATHAWAY LN

City ESSEX FELLS State NJ Zip Code 07021

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

Name of Employer SELF EMPLOYED Occupation BUSINESS OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.96356

Amount of Each Receipt this Period
200.00

C. MRS NANCY B ROTH 939

Full Name (Last, First, Middle Initial)
Mailing Address 8545 CARMEL VALLEY RD

City CARMEL State CA Zip Code 93923

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 M / D D D / Y Y Y Y Y Y
 08 / 16 / 2010
Transaction ID : SA11AI.96367

Amount of Each Receipt this Period
100.00

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 58 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MRS NANCY B ROTH 939
 Full Name (Last, First, Middle Initial)
 Mailing Address 8545 CARMEL VALLEY RD
 City CARMEL State CA Zip Code 93923
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 24 / 2010
Transaction ID : SA11AI.96368
 Amount of Each Receipt this Period
 100.00

B. MR EDWIN C SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1265.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 15 / 2010
Transaction ID : SA11AI.96474
 Amount of Each Receipt this Period
 120.00

C. MR EDWIN C SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 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 ▼ 1405.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2010
Transaction ID : SA11AI.96473
 Amount of Each Receipt this Period
 140.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 360.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 59 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR EDWIN C SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 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 ▼ 1555.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 18 / 2010
Transaction ID : SA11AI.96476
 Amount of Each Receipt this Period
 150.00

B. MR EDWIN C SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 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 ▼ 1780.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2010
Transaction ID : SA11AI.96472
 Amount of Each Receipt this Period
 225.00

C. MR EDWIN C SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 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 ▼ 1980.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2010
Transaction ID : SA11AI.96477
 Amount of Each Receipt this Period
 200.00

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 60 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR EDWIN C SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 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 ▼ 2205.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2010
Transaction ID : SA11AI.96475
 Amount of Each Receipt this Period
 225.00

B. MR STEPHEN A SANDOR 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 KINGS HWY
 City LINCOLN PARK State MI Zip Code 48146
 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 ▼ 487.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2010
Transaction ID : SA11AI.96480
 Amount of Each Receipt this Period
 100.00

C. MR STEPHEN A SANDOR 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 KINGS HWY
 City LINCOLN PARK State MI Zip Code 48146
 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 ▼ 537.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2010
Transaction ID : SA11AI.96481
 Amount of Each Receipt this Period
 50.00

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 61 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR STEPHEN A SANDOR 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 KINGS HWY
 City State Zip Code
 LINCOLN PARK MI 48146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 637.44

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 30 / 2010
Transaction ID : SA11AI.96483
 Amount of Each Receipt this Period
 100.00

B. MR STEPHEN A SANDOR 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 KINGS HWY
 City State Zip Code
 LINCOLN PARK MI 48146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 737.44

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2010
Transaction ID : SA11AI.96479
 Amount of Each Receipt this Period
 100.00

C. MR STEPHEN A SANDOR 481
 Full Name (Last, First, Middle Initial)
 Mailing Address 1717 KINGS HWY
 City State Zip Code
 LINCOLN PARK MI 48146
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 791.44

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 27 / 2010
Transaction ID : SA11AI.96482
 Amount of Each Receipt this Period
 54.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 254.00
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 62 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MISS ANN SCHUTT 207			Date of Receipt
Mailing Address 3021 CHAPEL VIEW DR			<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.96625
BELTSVILLE	MD	20705	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="500.00"/>
Name of Employer	Occupation		
MONTGOMERY CO PUBLIC SCH	TEACHER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. MR NORMAN SCHWOTZER 152			Date of Receipt
Mailing Address 730 BOWER HILL RD APT 302			<input type="text" value="07"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.96641
PITTSBURGH	PA	15243	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="300.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MR RUSSELL J SCHWULST 832			Date of Receipt
Mailing Address 334 OLD OREGON RD			<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
City	State	Zip Code	Transaction ID : SA11AI.96643
SODA SPRINGS	ID	83276	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation		
NONE	RETIRED		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="208.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="830.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. DR PENELOPE P SCOTT 210 MD
 Full Name (Last, First, Middle Initial)
 Mailing Address 11824 FALLS RD
 City COCKEYSVILLE State MD Zip Code 21030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.96646
 Amount of Each Receipt this Period
 150.00

B. JOHN SIAS 941
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 SACRAMENTO ST APT 1002
 City SAN FRANCISCO State CA Zip Code 94108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRONICLE PUBLISHING INC Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 09 / 2010
Transaction ID : SA11AI.96760
 Amount of Each Receipt this Period
 400.00

C. MR JOHN J SIEFFERT 480 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 RANDALL DR
 City TROY State MI Zip Code 48085
 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 M / D D D / Y Y Y Y Y Y
 07 / 22 / 2010
Transaction ID : SA11AI.96766
 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 64 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JOHN J SIEFFERT 480 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 RANDALL DR
 City TROY State MI Zip Code 48085
 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 M / D D D / Y Y Y Y Y Y
 08 / 12 / 2010
Transaction ID : SA11AI.96767
 Amount of Each Receipt this Period
 200.00

B. MR JOHN J SIEFFERT 480 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 740 RANDALL DR
 City TROY State MI Zip Code 48085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2010
Transaction ID : SA11AI.96768
 Amount of Each Receipt this Period
 300.00

C. MR EDVIN SKURDAL 640
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 BOWEN DR
 City RAYMORE State MO Zip Code 64083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2010
Transaction ID : SA11AI.96838
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 530.00
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 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR EDVIN SKURDAL 640
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 BOWEN DR
 City RAYMORE State MO Zip Code 64083
 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 Y Y
 08 / 10 / 2010
Transaction ID : SA11AI.96836
 Amount of Each Receipt this Period
 30.00

B. MR EDVIN SKURDAL 640
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 BOWEN DR
 City RAYMORE State MO Zip Code 64083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2010
Transaction ID : SA11AI.96837
 Amount of Each Receipt this Period
 40.00

C. MR EDVIN SKURDAL 640
 Full Name (Last, First, Middle Initial)
 Mailing Address 501 BOWEN DR
 City RAYMORE State MO Zip Code 64083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 08 / 2010
Transaction ID : SA11AI.96839
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 66 OF 100
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. COL RAY H SMITH 296
 Full Name (Last, First, Middle Initial)
 Mailing Address 228 LAKESIDE CIR
 City GREENVILLE State SC Zip Code 29615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer US MILITARY Occupation OFFICER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.96900
 Amount of Each Receipt this Period
 100.00

B. MR ROBERT F SPROWLS 920
 Full Name (Last, First, Middle Initial)
 Mailing Address 6929 SANDPIPER PL
 City CARLSBAD State CA Zip Code 92009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 26 / 2010
Transaction ID : SA11AI.97043
 Amount of Each Receipt this Period
 100.00

C. MS DIAN GRAVES STAI 786
 Full Name (Last, First, Middle Initial)
 Mailing Address 1286 CHERRY SPRING RD
 City FREDERICKSBURG State TX Zip Code 78624
 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
 M M M / D D D / Y Y Y Y Y Y
 09 / 08 / 2010
Transaction ID : SA11AI.97051
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
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 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR BOYD W STEPHENSON 244
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 104
 City MONTEREY State VA Zip Code 24465
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation SELF EMPLOYED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2010
Transaction ID : SA11AI.97119
 Amount of Each Receipt this Period
 150.00

B. MR ROBERT STICKEL 921
 Full Name (Last, First, Middle Initial)
 Mailing Address 2666 DOVE ST
 City SAN DIEGO State CA Zip Code 92103
 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 M / D D D / Y Y Y Y Y Y
 08 / 09 / 2010
Transaction ID : SA11AI.97144
 Amount of Each Receipt this Period
 100.00

C. MR HERBERT STOCKHAM 352
 Full Name (Last, First, Middle Initial)
 Mailing Address 2940 ARGYLE RD
 City BIRMINGHAM State AL Zip Code 35213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.97157
 Amount of Each Receipt this Period
 250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 68 OF 100
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. MR ROBERT SUNDERLAND 890		Date of Receipt
Mailing Address 953 PYRITE AVE		<input type="text" value="07"/> / <input type="text" value="19"/> / <input type="text" value="2010"/>
City	State	Zip Code
HENDERSON	NV	89011
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.97259
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) B. MR ROBERT SUNDERLAND 890		Date of Receipt
Mailing Address 953 PYRITE AVE		<input type="text" value="08"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
City	State	Zip Code
HENDERSON	NV	89011
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.97257
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="250.00"/>	

Full Name (Last, First, Middle Initial) C. MR ROBERT SUNDERLAND 890		Date of Receipt
Mailing Address 953 PYRITE AVE		<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
City	State	Zip Code
HENDERSON	NV	89011
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.97258
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 69 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR ROBERT SUNDERLAND 890
 Full Name (Last, First, Middle Initial)
 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 ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 07 / 2010
Transaction ID : SA11AI.97260
 Amount of Each Receipt this Period
 50.00

B. MR ROBERT SUNDERLAND 890
 Full Name (Last, First, Middle Initial)
 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 ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2010
Transaction ID : SA11AI.97261
 Amount of Each Receipt this Period
 50.00

C. CLIFFORD H SWENSEN 479 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 1700 LINDBERG RD
 City WEST LAFAYETTE State IN Zip Code 47906
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PURDUE UNIVERSITY Occupation PROFESSOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 10 / 2010
Transaction ID : SA11AI.97300
 Amount of Each Receipt this Period
 50.00

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

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

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

FOR LINE NUMBER: PAGE 70 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR DONALD TAYLOR 211
 Full Name (Last, First, Middle Initial)
 Mailing Address 3500 NICHOLSON RD
 City WESTMINSTER State MD Zip Code 21157
 Date of Receipt 08 / 25 / 2010
 Transaction ID : SA11AI.97343
 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 ▼ 225.00

B. MR WALLACE TIPPERY 985
 Full Name (Last, First, Middle Initial)
 Mailing Address 120 WILLIAM FAULKNER DR
 City CENTRALIA State WA Zip Code 98531
 Date of Receipt 07 / 22 / 2010
 Transaction ID : SA11AI.97446
 Amount of Each Receipt this Period 113.00
 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 ▼ 288.00

C. MR ROBERT S TROTH 358
 Full Name (Last, First, Middle Initial)
 Mailing Address 18 SAINT CHARLES SQ
 City HUNTSVILLE State AL Zip Code 35801
 Date of Receipt 09 / 14 / 2010
 Transaction ID : SA11AI.97518
 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 ▼ 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 463.00
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 71 OF 100
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JOHN VALERIUS 750
 Full Name (Last, First, Middle Initial)
 Mailing Address 1809 CANTERBURY
 City IRVING State TX Zip Code 75062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2010
Transaction ID : SA11AI.97608
 Amount of Each Receipt this Period
 100.00

B. MR WAYNE WAGGONER 624
 Full Name (Last, First, Middle Initial)
 Mailing Address 1616 CEDAR ST # 19-D
 City LAWRENCEVILLE State IL Zip Code 62439
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NONE Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 23 / 2010
Transaction ID : SA11AI.97705
 Amount of Each Receipt this Period
 250.00

C. MERLE WAIT 671
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 545
 City PROTECTION State KS Zip Code 67127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 14 / 2010
Transaction ID : SA11AI.97720
 Amount of Each Receipt this Period
 300.00

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 72 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR MARSHALL D WARD 921
 Full Name (Last, First, Middle Initial)
 Mailing Address 3229 28TH ST
 City SAN DIEGO State CA Zip Code 92104
 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 Y
 08 / 26 / 2010
Transaction ID : SA11AI.97800
 Amount of Each Receipt this Period
 100.00

B. MS CHERYL L WEBSTER 950
 Full Name (Last, First, Middle Initial)
 Mailing Address 3485 HAAS DR
 City APTOS State CA Zip Code 95003
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NOREN PRODUCTS INC Occupation VICE PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2010
Transaction ID : SA11AI.97876
 Amount of Each Receipt this Period
 600.00

C. MR BRUCE WETZEL 435
 Full Name (Last, First, Middle Initial)
 Mailing Address 7550 CODER RD
 City MAUMEE State OH Zip Code 43537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation REALTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 13 / 2010
Transaction ID : SA11AI.97951
 Amount of Each Receipt this Period
 200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 73 OF 100
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. MR JAMES WHITCOMB 852 JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 22840 N COUNTRY CLUB TRL
 City State Zip Code
 SCOTTSDALE AZ 85255
 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 M / D D D / Y Y Y Y Y Y
 08 / 10 / 2010
Transaction ID : SA11AI.97963
 Amount of Each Receipt this Period
 200.00

B. MRS MARGARET A WILSON 787
 Full Name (Last, First, Middle Initial)
 Mailing Address 2005 ARTHUR LN
 City State Zip Code
 AUSTIN TX 78704
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 UNIVERSITY OF TEXAS PROFESSOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 27 / 2010
Transaction ID : SA11AI.98079
 Amount of Each Receipt this Period
 250.00

C. MRS BARBARA H WILSON 941
 Full Name (Last, First, Middle Initial)
 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
 NONE RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 23 / 2010
Transaction ID : SA11AI.98084
 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 74 OF 100
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. BRYAN WRIGHT 208
Full Name (Last, First, Middle Initial)

Mailing Address 21129 GOLF ESTATES DR

City GAITHERSBURG	State MD	Zip Code 20882
----------------------	-------------	-------------------

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

Name of Employer BLACKWOOD ONE INC	Occupation EXECUTIVE
---------------------------------------	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	19	/	2010

Transaction ID : SA11AI.98176

Amount of Each Receipt this Period
250.00

B. MR REXFORD YOUNG 236
Full Name (Last, First, Middle Initial)

Mailing Address 147 WINDSOR CASTLE DR

City NEWPORT NEWS	State VA	Zip Code 23608
----------------------	-------------	-------------------

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 M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2010

Transaction ID : SA11AI.98221

Amount of Each Receipt this Period
400.00

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	43225.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. ADKINS EXPOSURES

Mailing Address 1308 RHODE ISLAND AVE NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
WEBSITE / BLOG

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2010

Transaction ID : **SB21B.90264**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

B. BASE CONNECT, INC.

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - CREATIVE

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2010

Transaction ID : **SB21B.90234**

Amount of Each Disbursement this Period

5524.29

Full Name (Last, First, Middle Initial)

C. BASE CONNECT, INC.

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - CREATIVE

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 28 / 2010

Transaction ID : **SB21B.90236**

Amount of Each Disbursement this Period

3343.85

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

9268.14

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. BASE CONNECT, INC.

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - CREATIVE

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2010

Transaction ID : **SB21B.90237**

Amount of Each Disbursement this Period

7598.19

Full Name (Last, First, Middle Initial)

B. BASE CONNECT, INC.

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - CREATIVE

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2010

Transaction ID : **SB21B.90238**

Amount of Each Disbursement this Period

4784.30

Full Name (Last, First, Middle Initial)

C. BASE CONNECT, INC.

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL - CREATIVE

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 23 / 2010

Transaction ID : **SB21B.90239**

Amount of Each Disbursement this Period

2857.45

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

15239.94

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)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2010

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.90266

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

3663.70

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		08		2010

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.90267

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

3359.36

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		22		2010

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.90268

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

9911.97

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

16935.03

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2010

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.90269

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

14956.65

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2010

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.90270

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

6757.01

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		02		2010

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.90271

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

19081.24

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

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

40794.90

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2010

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.90272

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

20399.07

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CENTURY DATA MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2010

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.90273

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

4728.74

Purpose of Disbursement
DIRECT MAIL - POSTAGE

003
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CENTURY DATA SYSTEMS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		28		2010

Mailing Address 1155 - 15TH STREET NW
SUITE 410

Transaction ID : SB21B.90240

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

1080.00

Purpose of Disbursement
DATA PROCESSING

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

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

26207.81

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CONSOLIDATED MAILING SERVICE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		22		2010

Mailing Address 504 SHAW ROAD
SUITE 206

Transaction ID : SB21B.90241

City STERLING State VA Zip Code 20166

Amount of Each Disbursement this Period

455.65

Purpose of Disbursement
DIRECT MAIL - PRINTING

003
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CONSOLIDATED MAILING SERVICE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		26		2010

Mailing Address 504 SHAW ROAD
SUITE 206

Transaction ID : SB21B.90242

City STERLING State VA Zip Code 20166

Amount of Each Disbursement this Period

4944.11

Purpose of Disbursement
DIRECT MAIL - PRINTING

003
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CONSOLIDATED MAILING SERVICE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2010

Mailing Address 504 SHAW ROAD
SUITE 206

Transaction ID : SB21B.90243

City STERLING State VA Zip Code 20166

Amount of Each Disbursement this Period

7133.27

Purpose of Disbursement
DIRECT MAIL - PRINTING

003
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

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

12533.03

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. MR EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
CONSULTING - MANAGEMENT

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2010

Transaction ID : SB21B.90274

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. MR EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
TRAVEL & OFFICE EXPENSE REIMB

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2010

Transaction ID : SB21B.90277

Amount of Each Disbursement this Period

566.38

Full Name (Last, First, Middle Initial)

C. MR EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
CONSULTING - MANAGEMENT

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2010

Transaction ID : SB21B.90275

Amount of Each Disbursement this Period

500.00

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

3066.38

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. MR EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
CONSULTING - MANAGEMENT

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2010

Transaction ID : SB21B.90276

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. ELECTRONIC REPORTING SYSTEMS INC

Mailing Address 683 BERRYVILLE AVE

City WINCHESTER State VA Zip Code 22601

Purpose of Disbursement
ELECTRONIC DISCLOSURE REPORTING

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2010

Transaction ID : SB21B.90245

Amount of Each Disbursement this Period

2104.20

Full Name (Last, First, Middle Initial)

C. ELECTRONIC REPORTING SYSTEMS INC

Mailing Address 683 BERRYVILLE AVE

City WINCHESTER State VA Zip Code 22601

Purpose of Disbursement
ELECTRONIC DISCLOSURE REPORTING

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2010

Transaction ID : SB21B.90246

Amount of Each Disbursement this Period

479.46

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

4083.66

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2010

Mailing Address 11325 RANDOM HILLS DR

Transaction ID : SB21B.90284

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

70.00

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2010

Mailing Address 11325 RANDOM HILLS DR

Transaction ID : SB21B.90285

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

95.35

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		22		2010

Mailing Address 11325 RANDOM HILLS DR

Transaction ID : SB21B.90280

City State Zip Code
FAIRFAX VA 22030

Amount of Each Disbursement this Period

4.95

Purpose of Disbursement
AMEX COLLECTION FEE

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

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

170.30

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

Category/
Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.90290

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

Category/
Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.90281

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

Category/
Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.90286

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2010

Transaction ID : **SB21B.90287**

Amount of Each Disbursement this Period

97.83

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX COLLECTION FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2010

Transaction ID : **SB21B.90278**

Amount of Each Disbursement this Period

4.95

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2010

Transaction ID : **SB21B.90282**

Amount of Each Disbursement this Period

42.08

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

144.86

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial) A. FIRST VIRGINIA COMMUNITY BANK		Date of Disbursement MM / DD / YYYY 08 / 31 / 2010
Mailing Address 11325 RANDOM HILLS DR		Transaction ID : SB21B.90291
City FAIRFAX	State VA	
Purpose of Disbursement SERVICE CHARGE		Amount of Each Disbursement this Period 224.79
Candidate Name BLACK REPUBLICAN PAC		Category/ Type 001
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: _____	

Full Name (Last, First, Middle Initial) B. FIRST VIRGINIA COMMUNITY BANK		Date of Disbursement MM / DD / YYYY 09 / 02 / 2010
Mailing Address 11325 RANDOM HILLS DR		Transaction ID : SB21B.90288
City FAIRFAX	State VA	
Purpose of Disbursement MERCHANT SERVICE CHARGE		Amount of Each Disbursement this Period 75.00
Candidate Name BLACK REPUBLICAN PAC		Category/ Type 001
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: _____	

Full Name (Last, First, Middle Initial) C. FIRST VIRGINIA COMMUNITY BANK		Date of Disbursement MM / DD / YYYY 09 / 02 / 2010
Mailing Address 11325 RANDOM HILLS DR		Transaction ID : SB21B.90289
City FAIRFAX	State VA	
Purpose of Disbursement MERCHANT SERVICE CHARGE		Amount of Each Disbursement this Period 283.51
Candidate Name BLACK REPUBLICAN PAC		Category/ Type 001
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).....▶	583.30
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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX COLLECTION FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 22 / 2010

Transaction ID : **SB21B.90279**

Amount of Each Disbursement this Period

4.95

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2010

Transaction ID : **SB21B.90283**

Amount of Each Disbursement this Period

39.62

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2010

Transaction ID : **SB21B.90292**

Amount of Each Disbursement this Period

172.44

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

217.01

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)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. HIGHER STANDARD ENTEPRISES

Mailing Address 901 JONES FRANKLIN RD

City RALEIGH State NC Zip Code 27606

Purpose of Disbursement
TEA PARTY JOURNAL AD

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2010

Transaction ID : **SB21B.90294**

Amount of Each Disbursement this Period

2400.00

Full Name (Last, First, Middle Initial)

B. HIGHER STANDARD ENTEPRISES

Mailing Address 901 JONES FRANKLIN RD

City RALEIGH State NC Zip Code 27606

Purpose of Disbursement
TEA PARTY JOURNAL AD

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2010

Transaction ID : **SB21B.90295**

Amount of Each Disbursement this Period

2400.00

Full Name (Last, First, Middle Initial)

C. INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 22 / 2010

Transaction ID : **SB21B.90247**

Amount of Each Disbursement this Period

4631.59

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

9431.59

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2010

Transaction ID : **SB21B.90248**

Amount of Each Disbursement this Period

2063.53

Full Name (Last, First, Middle Initial)

B. INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2010

Transaction ID : **SB21B.90249**

Amount of Each Disbursement this Period

2691.17

Full Name (Last, First, Middle Initial)

C. LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2010

Transaction ID : **SB21B.90250**

Amount of Each Disbursement this Period

6259.19

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

11013.89

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2010

Transaction ID : **SB21B.90255**

Amount of Each Disbursement this Period

2839.26

Full Name (Last, First, Middle Initial)

B. LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2010

Transaction ID : **SB21B.90251**

Amount of Each Disbursement this Period

685.00

Full Name (Last, First, Middle Initial)

C. LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 15 / 2010

Transaction ID : **SB21B.90256**

Amount of Each Disbursement this Period

461.10

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

3985.36

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2010

Transaction ID : **SB21B.90252**

Amount of Each Disbursement this Period

3647.42

Full Name (Last, First, Middle Initial)

B. LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 19 / 2010

Transaction ID : **SB21B.90257**

Amount of Each Disbursement this Period

1713.00

Full Name (Last, First, Middle Initial)

C. LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2010

Transaction ID : **SB21B.90253**

Amount of Each Disbursement this Period

5603.46

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

10963.88

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2010

Transaction ID : **SB21B.90258**

Amount of Each Disbursement this Period

1975.24

Full Name (Last, First, Middle Initial)

B. LEGACY LISTS INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 02 / 2010

Transaction ID : **SB21B.90254**

Amount of Each Disbursement this Period

1405.85

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANY

Mailing Address 3464 S UTAH ST

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 26 / 2010

Transaction ID : **SB21B.90259**

Amount of Each Disbursement this Period

1500.00

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

4881.09

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. RED CAP STRATEGY

Mailing Address PO BOX 300503

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement
WEBSITE DESIGN & UPDATE

001

Candidate Name
BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
09 / 16 / 2010

Transaction ID : **SB21B.90296**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
CAGING & ESCROW SERVICES

001

Candidate Name
BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2010

Transaction ID : **SB21B.90260**

Amount of Each Disbursement this Period

776.22

Full Name (Last, First, Middle Initial)

C. WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
CAGING & ESCROW SERVICES

001

Candidate Name
BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

MM / DD / YYYY
08 / 12 / 2010

Transaction ID : **SB21B.90261**

Amount of Each Disbursement this Period

1085.10

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

4861.32

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		19		2010

Mailing Address 4128 PEPSI PLACE

Transaction ID : SB21B.90262

City State Zip Code
CHANTILLY VA 20151

Amount of Each Disbursement this Period

610.11

Purpose of Disbursement
CAGING & ESCROW SERVICES

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		16		2010

Mailing Address 4128 PEPSI PLACE

Transaction ID : SB21B.90263

City State Zip Code
CHANTILLY VA 20151

Amount of Each Disbursement this Period

1114.20

Purpose of Disbursement
CAGING & ESCROW SERVICES

001
Category/ Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
-------	---	-------	---	-----------

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

1724.31

176318.13

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. ALLEN WEST FOR CONGRESS

Mailing Address PO BOX 30786

City PALM BEACH GARDENS State FL Zip Code 33420

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

ALLEN B WEST

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 22

Date of Disbursement

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

Transaction ID : **SB23.90307**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. CHARLES LOLLAR FOR CONGRESS

Mailing Address PO BOX 357

City WHITE PLAINS State MD Zip Code 20695

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

CHARLES J LOLLAR

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

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

Transaction ID : **SB23.90310**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. CHRIS NWASIKE FOR CONGRESS

Mailing Address 1093 N MCDUFF AVE

City JACKSONVILLE State FL Zip Code 32254

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

C CHRISTIAN NWASIKE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: FL District: 03

Date of Disbursement

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

Transaction ID : **SB23.90309**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	1	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

1	1	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. CITIZENS FOR ISAAC HAYES

Mailing Address 301 NEW SALEM ST

City State Zip Code
PARK FOREST IL 60466

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

ISAAC C HAYES

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: IL District: 02

Date of Disbursement

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

Transaction ID : **SB23.90311**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. FRIENDS OF SHARRON ANGLE

Mailing Address PO BOX 33058

City State Zip Code
RENO NV 89533

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

SHARRON E ANGLE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NV District: 00

Date of Disbursement

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

Transaction ID : **SB23.90308**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. TIM SCOTT FOR CONGRESS

Mailing Address 1405 ASHLEY RIVER ROAD

City State Zip Code
CHARLESTON SC 29407

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

TIMOTHY E SCOTT

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: SC District: 01

Date of Disbursement

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

Transaction ID : **SB23.90312**

Amount of Each Disbursement this Period

2	5	0	0	0	0	0	0	0	0

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

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

8	5	0	0	0	0	0	0	0	0

1	9	5	0	0	0	0	0	0	0

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 97 OF 100
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT, INC.	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 38776.11	Transaction ID : SD10.4113	
Amount Incurred This Period 26370.98	Payment This Period 24108.08	Outstanding Balance at Close of This Period 41039.01

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS	Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.90227	
Amount Incurred This Period 5383.21	Payment This Period 1080.00	Outstanding Balance at Close of This Period 4303.21

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE	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 : SD10.90228	
Amount Incurred This Period 2559.38	Payment This Period 0.00	Outstanding Balance at Close of This Period 2559.38

1) SUBTOTALS This Period This Page (optional)..... ▶	47901.60
2) TOTALS This Period (last page this line number only)..... ▶	
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) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 98 OF 100
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICE	Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 504 SHAW ROAD SUITE 206	
City State Zip Code STERLING VA 20166	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.90229	
Amount Incurred This Period 42375.44	Payment This Period 12533.03	Outstanding Balance at Close of This Period 29842.41

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ELECTRONIC REPORTING SYSTEMS INC	Nature of Debt (Purpose): ELECTRONIC DISCLOSURE REPORTING
Mailing Address 683 BERRYVILLE AVE	
City State Zip Code WINCHESTER VA 22601	

Outstanding Balance Beginning This Period 479.46	Transaction ID : SD10.63979	
Amount Incurred This Period 7173.40	Payment This Period 2583.66	Outstanding Balance at Close of This Period 5069.20

C. 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 : SD10.90231	
Amount Incurred This Period 15799.63	Payment This Period 9386.29	Outstanding Balance at Close of This Period 6413.34

1) SUBTOTALS This Period This Page (optional)..... ▶	41324.95
2) TOTALS This Period (last page this line number only)..... ▶	
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) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 99 OF 100
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LISTS INC	Nature of Debt (Purpose): FUNDRAISING LIST RENTALS FOR BRPAC
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 21433.51	Transaction ID : SD10.4117	
Amount Incurred This Period 3156.01	Payment This Period 24589.52	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor MACKENZIE & COMPANY	Nature of Debt (Purpose): CONSULTING - COMPLIANCE
Mailing Address 3464 S UTAH ST	
City State Zip Code ARLINGTON VA 22206	

Outstanding Balance Beginning This Period 3000.00	Transaction ID : SD10.72919	
Amount Incurred This Period 0.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 1500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor PATTON-KIEHL GROUP	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address PO BOX 590	
City State Zip Code THORNBURG VA 22565	

Outstanding Balance Beginning This Period 189.95	Transaction ID : SD10.63997	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 189.95

1) SUBTOTALS This Period This Page (optional)..... ▶	1689.95
2) TOTALS This Period (last page this line number only)..... ▶	
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) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 100 OF 100
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor WASHINGTON INTELLIGENCE BUREAU	Nature of Debt (Purpose): CAGING & ESCROW SERVICES
Mailing Address 4128 PEPSI PLACE	
City State Zip Code CHANTILLY VA 20151	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.90233	
Amount Incurred This Period 6665.47	Payment This Period 3585.63	Outstanding Balance at Close of This Period 3079.84

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WEST END PRINTING CO	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 1609 SHERWOOD AVE	
City State Zip Code RICHMOND VA 23220	

Outstanding Balance Beginning This Period 200.00	Transaction ID : SD10.23902	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 200.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	3279.84
2) TOTALS This Period (last page this line number only)..... ▶	94196.34
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) ▶	94196.34