

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 310 FIRST STREET SE WASHINGTON DC 20003 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00003418 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 03 01 2009 through 03 31 2009

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

Type or Print Name of Treasurer Mr Randall Pullen

Signature of Treasurer Electronically Filed by Mr Randall Pullen Date 12 08 2010

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
REPUBLICAN NATIONAL COMMITTEE

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		15158787.07
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	24001809.02									
(c) Total Receipts (from Line 19)	6856110.07	25359558.68								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	30857919.09	40518345.75								
7. Total Disbursements (from Line 31)	6917924.44	16578351.10								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	23939994.65	23939994.65								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
REPUBLICAN NATIONAL COMMITTEE

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1594728.27	4121421.70
(ii) Unitemized	5021736.94	13274289.79
(iii) TOTAL (add Lines 11(a)(i) and (ii)	6616465.21	17395711.49
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	122500.00	257500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	6738965.21	17653211.49
12. Transfers From Affiliated/Other Party Committees	106749.11	7534728.22
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)	10371.95	165642.58
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5952.59
17. Other Federal Receipts (Dividends, Interest, etc.)	23.80	23.80
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	6856110.07	25359558.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6856110.07	25359558.68

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	4663333.23	13443131.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4663333.23	13443131.51
22. Transfers to Affiliated/Other Party Committees.....	2210103.36	2638703.36
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2968.80
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	-17807.15	100218.43
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	60195.00	348129.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	45000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	60195.00	393129.00
29. Other Disbursements.....	100.00	200.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6917924.44	16578351.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6917924.44	16578351.10

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	6738965.21	17653211.49
34. Total Contribution Refunds (from Line 28(d))	60195.00	393129.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6678770.21	17260082.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4663333.23	13443131.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	10371.95	165642.58
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4652961.28	13277488.93

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

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

FOR LINE NUMBER: PAGE 6 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Scott G Abadie
 Mailing Address 401 Tiffany
 City State Zip Code
 River Ridge LA 70123-1541
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2009
Transaction ID: 2009M04L11ai00001
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Abadie Veterinary Hospital Veterinarian
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

B. Full Name (Last, First, Middle Initial)
Dr. Scott G Abadie
 Mailing Address 401 Tiffany
 City State Zip Code
 River Ridge LA 70123-1541
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2009
Transaction ID: 2009M04L11ai00002
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Abadie Veterinary Hospital Veterinarian
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

C. Full Name (Last, First, Middle Initial)
Mrs. Anna Abers
 Mailing Address 4600 Via Dolce
 Apartment 306
 City State Zip Code
 Marina Del Rey CA 90292-6775
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2009
Transaction ID: 2009M04L11ai00003
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Self-Employed
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

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

A. Form/Schedule : **SA11AI**

Transaction ID :

Regarding negative receipts listed on line 11(a)(i) with the description of 'ACH Return', these are interbank clearing of electronic payments processed by the Automated Clearing House (ACH) network of participating banks and the Federal Reserve. These are returns of contributions by individuals which have been deducted from our credit card merchant account or bank account by the credit card company or bank.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert Abrams

Mailing Address 16 Hudson Street
Apartment 6D

City State Zip Code
New York NY 10013-3886

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

Name of Employer Occupation
Abbeville Press Book Publisher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00004

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Albert Abrevaya

Mailing Address 171 Windermere Dr.

City State Zip Code
Blue Bell PA 19422-1455

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00005

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Mike & Mary Abroe

Mailing Address 212 Woodbine Avenue

City State Zip Code
Wilmette IL 60091-3332

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

Name of Employer Occupation
Milliman Consulting Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 2009M04L11ai00006

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joseph Abrutz, Jr.
Mailing Address P.O. Box 308

City State Zip Code
Cameron MO 64429-0308

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

Name of Employer Occupation
Cameron Regional Medical Hospital Administrator
Center

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

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

Transaction ID: 2009M04L11ai00007

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Dr. Joseph Accurso
Mailing Address 2801 7Th Avenue S.W.

City State Zip Code
Austin MN 55912-5522

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

Name of Employer Occupation
Austin Medical Center Physician

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

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

Transaction ID: 2009M04L11ai00008

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. David E. Adams
Mailing Address 19515 S.W. 48Th Avenue

City State Zip Code
Tualatin OR 97062-7708

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

Name of Employer Occupation
Geffen Mesher & Company CPA

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

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00009

Amount of Each Receipt this Period
250.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth H. Adams

Mailing Address 1016 Emeryway Way # 204

City Los Angeles State CA Zip Code 90067

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai00010

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth H. Adams

Mailing Address 1016 Emeryway Way # 204

City Los Angeles State CA Zip Code 90067

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 18 / 2009

Transaction ID: 2009M04L11ai00011

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jean C. Adams

Mailing Address P.O. Box 687

City Wilson State WY Zip Code 83014-0687

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai00012

Amount of Each Receipt this Period 300.00

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 11 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lex W. Adams

Mailing Address P.O. Box 19696

City State Zip Code
Reno NV 89511-2404

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00013

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Peter H. & Diane Adams

Mailing Address 1065 Westridge Avenue

City State Zip Code
Danville CA 94526-4827

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00014

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Barbara C. Adkins

Mailing Address 3775 Jackson Bend Dr.

City State Zip Code
Louisville TN 37777-3775

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00015

Amount of Each Receipt this Period
250.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 12 / 1945
	(check only one)	
	<input checked="" 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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Patricia Adkins		Date of Receipt																					
	Mailing Address 302 S. Main Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	6		2	0	0	9														
	City Palmer State TX Zip Code 75152-9564		Transaction ID: 2009M04L11ai00016																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Requested Aggregate Year-to-Date ▼ 300.00																						

B.	Full Name (Last, First, Middle Initial) Mrs. Patricia Adkins		Date of Receipt																					
	Mailing Address 302 S. Main Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	4		2	0	0	9														
	City Palmer State TX Zip Code 75152-9564		Transaction ID: 2009M04L11ai00017																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Requested Aggregate Year-to-Date ▼ 300.00																						

C.	Full Name (Last, First, Middle Initial) Mohammad Afaneh		Date of Receipt																					
	Mailing Address P.O. Box 451614		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	0		2	0	0	9														
	City Ft Lauderdale State FL Zip Code 33345		Transaction ID: 2009M04L11ai00018																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer America's Pharmacy Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation C E O Aggregate Year-to-Date ▼ 2000.00																						

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 13 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mohammad Afaneh

Mailing Address P.O. Box 451614

City State Zip Code
Ft Lauderdale FL 33345

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

Name of Employer Occupation
America's Pharmacy C E O

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00019

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Arthur S. Agatston

Mailing Address 1691 Michigan Avenue Suite 500

City State Zip Code
Miami Beach FL 33139-2559

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

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00020

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Abdu Aghzafi

Mailing Address 113 St Edward Place

City State Zip Code
Palm Beach Gardens FL 33418-4606

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

Name of Employer Occupation
N/A Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00021

Amount of Each Receipt this Period
440.00

SUBTOTAL of Receipts This Page (optional) ► 1940.00

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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Henriette C Aghzafi

Mailing Address 113 St Edward Place

City State Zip Code
Palm Beach Gardens FL 33418-4606

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00022

Amount of Each Receipt this Period
440.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert Ahlers

Mailing Address 722 W. McLellan Road

City State Zip Code
Mesa AZ 85201-2123

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

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

Transaction ID: 2009M04L11ai00023

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
Dr. Mary B. Ahlgren

Mailing Address 602 N. 3Rd Street

City State Zip Code
LeClaire IA 52753-9407

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00024

Amount of Each Receipt this Period
100.00

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 15 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. W. James Aiken, Jr.
Mailing Address 3020 Scottish Rite Lane
City State Zip Code
Sewickley PA 15143-2420
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00025
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Herbert Ailes
Mailing Address 129 Bufflehead Drive
City State Zip Code
Kiawah Island SC 29455-5738
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai00026
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Heino Ainsö
Mailing Address 61 Highbrook Ave.
City State Zip Code
Pelham NY 10803-1713
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00027
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: PAGE 16 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. John M. Airy

Mailing Address 17207 N. Boswell Blvd.
Apartment 106

City State Zip Code
Sun City AZ 85373-3001

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **03 / 05 / 2009**

Transaction ID: 2009M04L11ai00028

Amount of Each Receipt this Period **200.00**

B.

Full Name (Last, First, Middle Initial)
Mr. Michael Aki

Mailing Address P.O. Box 378

City State Zip Code
Lawai HI 96765-0378

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

Name of Employer Hawaii Partition Systems Occupation Constuction

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1600.00**

Date of Receipt **03 / 30 / 2009**

Transaction ID: 2009M04L11ai00029

Amount of Each Receipt this Period **500.00**

C.

Full Name (Last, First, Middle Initial)
Ms. Jane G. Akin

Mailing Address 55 Hillcrest Road

City State Zip Code
Weston MA 02493-2020

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 06 / 2009**

Transaction ID: 2009M04L11ai00030

Amount of Each Receipt this Period **500.00**

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 17 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James C. Alban, III

Mailing Address 3908 N. Charles Street

City Baltimore State MD Zip Code 21218-1799

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai00031
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert H. Alcorn

Mailing Address 200 Midland Drive

City Pinehurst State NC Zip Code 28374-8255

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai00032
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mr. James J Alex

Mailing Address 1 Shore Lane No. 2701

City Jersey City State NJ Zip Code 07310-2080

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

Name of Employer Ernst & Young Llp Occupation Lawyer/Partner/Principle

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 04 / 2009
Transaction ID: 2009M04L11ai00033
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1450.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Darleen Alexander
Mailing Address 7316 Village 7
City Camarillo State CA Zip Code 93012-6926
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00034
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Jean Alexander
Mailing Address 645 Brookline Place
City Fullerton State CA Zip Code 92835-2772
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00
Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai00035
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Marci R. Alexander
Mailing Address 37605 E. Jim Owens Road
City Oak Grove State MO Zip Code 64075-8138
FEC ID number of contributing federal political committee. **C**
Name of Employer Life Insurance Company Occupation Avp Customer Service
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai00036
Amount of Each Receipt this Period 100.00

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 19 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Shane C. Alexander

Mailing Address 870 N. Peytonville Avenue

City State Zip Code
Southlake TX 76092-5832

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

Name of Employer Occupation
X.T.O. Energy, Inc. Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00037

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mrs. Deborah K. Alfano

Mailing Address 2898 Fairfield Drive

City State Zip Code
Allentown PA 18103-5412

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00038

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary Alger

Mailing Address 7452 Foxfire Drive

City State Zip Code
Crystal Lake IL 60012-1608

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

Name of Employer Occupation
None None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00039

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ► 560.00

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 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Theodore C. & Emme H Allebes	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 8833 Barrister Lane	Transaction ID: 2009M04L11ai00040
	City State Zip Code Fair Oaks CA 95628-6350	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Bruce Allen	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 2708 Harborside Drive	Transaction ID: 2009M04L11ai00041
	City State Zip Code Granbury TX 76048-2694	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Mr. Charles S. Allen, Jr.	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 6304 Godfrey Drive	Transaction ID: 2009M04L11ai00042
	City State Zip Code Raleigh NC 27612-6735	Amount of Each Receipt this Period 255.00
	FEC ID number of contributing federal political committee. C	
Name of Employer N.C. Farm Bureau Mutual Insurance Comp	Occupation Litigation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

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: PAGE 21 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Douglas L. Allen

Mailing Address 10811 Rosemont Court

City State Zip Code
Fort Myers FL 33908-2842

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00043

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth Dee Allen

Mailing Address 6218 Chisom Trail

City State Zip Code
Tyler TX 75703

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 2009M04L11ai00044

Amount of Each Receipt this Period
220.00

C. Full Name (Last, First, Middle Initial)
Mr. Forrest J. Allen

Mailing Address 22 Sandingham Way

City State Zip Code
The Woodlands TX 77384-4490

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00045

Amount of Each Receipt this Period
100.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 1945
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. George H. Allen		Date of Receipt
	Mailing Address 2799 South Downing Street		<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Englewood	CO	80113-1774
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai00046
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="100.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. James P. Allen		Date of Receipt
	Mailing Address 108 S. Mc Cadden Place		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Los Angeles	CA	90004-1052
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai00047
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="285.00"/>	<input type="text" value="285.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Robert E. Allen		Date of Receipt
	Mailing Address 1908 Sawmill Creek Road		<input type="text" value="03"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Sitka	AK	99835-1049
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai00048
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="400.00"/>	<input type="text" value="400.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="785.00"/>
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 23 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Uzerne W. Allen, Jr.
Mailing Address 536 Happ Road
City Northfield State IL Zip Code 60093-1112
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai00049
Amount of Each Receipt this Period 35.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas Allenburg
Mailing Address 6621 Minnewashta Parkway
City Excelsior State MN Zip Code 55331-9657
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai00050
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Stuart Allhands
Mailing Address 8675 Pine Run
City Daphne/Spanish For State AL Zip Code 36527-8637
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai00051
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 385.00
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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Deborah Allik

Mailing Address 2260 Seaside Street

City State Zip Code
Vero Beach FL 32963-3131

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00052

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. A. W. Allison, U.S.N. (Re)

Mailing Address 3613 Sea Horse Way

City State Zip Code
Virginia Beach VA 23452-3721

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00053

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert N. Almon

Mailing Address P.O. Box 2687

City State Zip Code
Tuscaloosa AL 35403-2687

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00054

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **540.00**

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

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

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

FOR LINE NUMBER: PAGE 25 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Alton W. Almquist
Mailing Address 3942 Cowell Blvd.
City State Zip Code
Davis CA 95618-4391
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt MM / DD / YYYY
03 / 06 / 2009
Transaction ID: 2009M04L11ai00055
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Mr. Alton W. Almquist
Mailing Address 3942 Cowell Blvd.
City State Zip Code
Davis CA 95618-4391
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00
Date of Receipt MM / DD / YYYY
03 / 16 / 2009
Transaction ID: 2009M04L11ai00056
Amount of Each Receipt this Period 295.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Almquist
Mailing Address 4527 Magnolia Bridge Rd.
City State Zip Code
Charlotte NC 28210-4337
FEC ID number of contributing federal political committee. **C**
Name of Employer Carmel Family Physicians Occupation Family Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt MM / DD / YYYY
03 / 06 / 2009
Transaction ID: 2009M04L11ai00057
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 570.00
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 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James M. Alsup

Mailing Address 300 N. Marienfeld Street
Suite 700

City Midland State TX Zip Code 79701-4322

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

Name of Employer Lynch, Chappell, & Alsup, P.C. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 25 / 2009
Transaction ID: 2009M04L11ai00058
Amount of Each Receipt this Period 125.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert M. Alt

Mailing Address P.O. Box 8559

City Bartlett State IL Zip Code 60103-8559

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 530.00

Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai00059
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert M. Alt

Mailing Address P.O. Box 8559

City Bartlett State IL Zip Code 60103-8559

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 530.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai00060
Amount of Each Receipt this Period 330.00

SUBTOTAL of Receipts This Page (optional) ▶ 555.00

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 27 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Roger & Scotia Alves

Mailing Address **3283 Calle De Debasa**

City **Camarillo** State **CA** Zip Code **93010-8337**

FEC ID number of contributing federal political committee. C

Name of Employer **Self-Employed** Occupation **Self-Employed**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 2009M04L11ai00061

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Linda Alvord

Mailing Address **1538 Bedford**

City **Clovis** State **CA** Zip Code **93611-6606**

FEC ID number of contributing federal political committee. C

Name of Employer **Fresno Unified School District** Occupation **Teacher**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00062

Amount of Each Receipt this Period 350.00

C. Full Name (Last, First, Middle Initial)
Mrs. Dorothy T. Amador

Mailing Address **163 Pinefield Drive**

City **Sanford** State **FL** Zip Code **32771-6813**

FEC ID number of contributing federal political committee. C

Name of Employer **Retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00063

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 1450.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 28 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Clinton Guy Ames, Jr.
Mailing Address P.O. Box 137

City State Zip Code
Point Clear AL 36564-0137

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai00064
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Gene L. Ames, III
Mailing Address P.O. Box 90555

City State Zip Code
San Antonio TX 78209

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

Name of Employer Requested Occupation Requested
The Nordan Trust Geologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 03 / 10 / 2009
Transaction ID: 2009M04L11ai00065
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Donald J. & Sharon Amis
Mailing Address 707 Buck Avenue

City State Zip Code
Vacaville CA 95688-3513

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

Name of Employer Requested Occupation Requested
U.S. Department Of State Diplomatic Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai00066
Amount of Each Receipt this Period: 230.00

SUBTOTAL of Receipts This Page (optional) ► 3030.00

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 / 1945		
	<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

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Jacqueline Ammirata

Mailing Address 70 Meadowfarm Road

City East Islip State NY Zip Code 11730-2909

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai00067
Amount of Each Receipt this Period: 100.00

B.

Full Name (Last, First, Middle Initial)
Mr. John C. Amoroso

Mailing Address 32 Church Street

City Westborough State MA Zip Code 01581-1923

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai00068
Amount of Each Receipt this Period: 200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael Anaclerio

Mailing Address 306 Colleton Avenue S.E.

City Aiken State SC Zip Code 29801-7102

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

Name of Employer Smith Barney Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai00069
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 30 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Carl Anderson

Mailing Address P.O. Box 644

City State Zip Code
Reading PA 19608-0944

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: 2009M04L11ai00070

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Doctor David G. Anderson

Mailing Address 1526 Perdita Way

City State Zip Code
Greer SC 29650-4565

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

Name of Employer Occupation
Advanced Surgical Associa- Physician
-tes

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00071

Amount of Each Receipt this Period
255.00

C. Full Name (Last, First, Middle Initial)
Ms. Diane Anderson

Mailing Address 11 Shadow Creek Dr.

City State Zip Code
North Las Vegas NV 89081-2404

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

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

Transaction ID: 2009M04L11ai00072

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1755.00**

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

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

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

FOR LINE NUMBER: PAGE 31 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Dion Anderson

Mailing Address 1016 Holly Road

City State Zip Code
Santa Paula CA 93060-1226

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

Name of Employer Ret. Occupation
Actor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00073

Amount of Each Receipt this Period
120.00

B. Full Name (Last, First, Middle Initial)
Mr. Edor G. Anderson, Jr.

Mailing Address 2342 Hogan Way

City State Zip Code
Oceanside CA 92056-3711

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

Name of Employer Retired Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00074

Amount of Each Receipt this Period
120.00

C. Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation
Marketing9

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

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

Transaction ID: 2009M04L11ai00075

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► **245.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00076

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00077

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00078

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional)

15.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00079

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00080

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00081

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► **15.00**

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 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00082

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00083

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00084

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ▶

15.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

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

Transaction ID: 2009M04L11ai00085

Amount of Each Receipt this Period
5.00

B. Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

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

Transaction ID: 2009M04L11ai00086

Amount of Each Receipt this Period
5.00

C. Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

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

Transaction ID: 2009M04L11ai00087

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► 15.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 13 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00088
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 13 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00089
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 13 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00090
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	15.00
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 / 1945
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00091

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00092

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00093

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

15.00

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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 13 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00094
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 13 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00095
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 13 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00096
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	15.00
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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 13 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00097
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 20 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00098
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 20 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00099
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	15.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 40 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00100

Amount of Each Receipt this Period
5.00

B. Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00101

Amount of Each Receipt this Period
5.00

C. Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00102

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► **15.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 27 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00103
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 27 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00104
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Mr. Eric R. Anderson		Date of Receipt MM / DD / YYYY 03 / 27 / 2009
Mailing Address 6547 Grange Lane 404		Transaction ID: 2009M04L11ai00105
City Alexandria	State Zip Code VA 22315-5850	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer Rnc9	Occupation Marketing9	Aggregate Year-to-Date ▼ 560.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	15.00
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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00106

Amount of Each Receipt this Period
5.00

B.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00107

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Eric R. Anderson

Mailing Address 6547 Grange Lane
404

City State Zip Code
Alexandria VA 22315-5850

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

Name of Employer Rnc9 Occupation Marketing9

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
560.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00108

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional) ► **35.00**

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 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Erik Anderson		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address 640 Aaron Avenue		Transaction ID: 2009M04L11ai00109		
	City Springville	State UT	Zip Code 84663-1544	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer J-U-B Engineers Inc.	Occupation Cadd Tech/Draftsman			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Jack Anderson		Date of Receipt MM / DD / YYYY 03 / 31 / 2009		
	Mailing Address 18849 Harbor Side Blvd.		Transaction ID: 2009M04L11ai00110		
	City Montgomery	State TX	Zip Code 77356-3223	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self Employed	Occupation Mfg Sales Rep			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

C.	Full Name (Last, First, Middle Initial) Mrs. Jean Anderson		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 14210 Arbolitos Drive		Transaction ID: 2009M04L11ai00111		
	City Poway	State CA	Zip Code 92064-6440	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

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 44 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Raymond E. Anderson

Mailing Address 6221 S. Racine Circle

City Englewood State CO Zip Code 80111-6427

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

Name of Employer S.E.A.K.R. Engineering, Inc. Occupation Corporation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai00112

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Rex Anderson

Mailing Address 1915 490Th Avenue

City Ringsted State IA Zip Code 50578

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2009

Transaction ID: 2009M04L11ai00113

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Thurman C. Anderson

Mailing Address 12337 N. Fairway Heights Drive

City Mequon State WI Zip Code 53092-2267

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai00114

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 1450.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Thurman C. Anderson

Mailing Address 12337 N. Fairway Heights Drive

City State Zip Code
Mequon WI 53092-2267

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00115

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. Charles Andreas

Mailing Address N483 20th Rd

City State Zip Code
Neshkoro WI 54960-6484

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

Name of Employer Occupation
Requested Requested

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00116

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. John S. Andrenacci

Mailing Address 2634 S. Warnock Street

City State Zip Code
Philadelphia PA 19148-4419

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

Name of Employer Occupation
Horizon Health Mental Health Care

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00117

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)

510.00

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 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Gregory Andrews

Mailing Address 216 Butternut Drive

City State Zip Code
Fredericksburg VA 22408-1511

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

Name of Employer Occupation
U.S. Army United States Army Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00118

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Michael L. Andrews

Mailing Address 80 Mc Kinley Springs Road

City State Zip Code
Prosser WA 99350-9307

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

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00119

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Wilson & Elsie Andrews

Mailing Address 6727 40Th Street N.E.

City State Zip Code
Marysville WA 98270-6913

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: 2009M04L11ai00120

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **525.00**

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 47 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Mario D. Angelini	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 13237 4Th S. Avenue	Transaction ID: 2009M04L11ai00121
	City State Zip Code Burien WA 98168	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation USPS Mechanic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. George Angelos	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 9 Bryant Court	Transaction ID: 2009M04L11ai00122
	City State Zip Code Ladera Ranch CA 92694-1089	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Accenture Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Ms. Louise B. Angiuli	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 29 Forest Drive	Transaction ID: 2009M04L11ai00123
	City State Zip Code Port Washington NY 11050-1910	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Requested Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	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 48 / 1945
(check only one)

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

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ms. Louise B. Angiuli

Mailing Address 29 Forest Drive

City State Zip Code
Port Washington NY 11050-1910

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

Name of Employer Requested Occupation Requested

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai00124

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)

Mr. Doug Angstrom

Mailing Address 11628 Musket Rim Street

City State Zip Code
Austin TX 78738-6600

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai00125

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)

Mr. William A. Angus

Mailing Address 15135 Huntington Gate Drive

City State Zip Code
Poway CA 92064-6705

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai00126

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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 49 / 1945
	(check only one)	
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Helen K. Ankarlo	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 2510 Ranch Reserve Ridge	Transaction ID: 2009M04L11ai00127
	City State Zip Code Westminster CO 80234-1031	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Ankarlo Management, Inc. Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. Howard Annin	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 147 Saint Thomas Way	Transaction ID: 2009M04L11ai00128
	City State Zip Code Tiburon CA 94920-1031	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. Steven Anson	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 203 E. Douglas Street #717	Transaction ID: 2009M04L11ai00129
	City State Zip Code O' Neill NE 68763-1827	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 50 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stanley J. Antanaitis

Mailing Address 7897 Lutz Avenue N.W.

City State Zip Code
Massillon OH 44646-9077

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00130

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Tim D. Apple

Mailing Address 4038 E. Nc Highway 150

City State Zip Code
Browns Summit NC 27214-9653

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

Name of Employer New Earth Designs Inc Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00131

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Mariann Hundahl Appley

Mailing Address 2 Commonwealth Avenue

City State Zip Code
Boston MA 02116-3153

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00132

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Scott G. Arbuckle

Mailing Address 17301 Club Hill Drive

City State Zip Code
Dallas TX 75248-1107

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	9

Transaction ID: 2009M04L11ai00133

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark A. Arensmyers

Mailing Address 2004 W. Cavendish Court

City State Zip Code
Alpharetta GA 30022-7121

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00134

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Joe W. Arledge, III

Mailing Address 2801 Arledge Rd.

City State Zip Code
Robert Lee TX 76945-3019

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00135

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► **2300.00**

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

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

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

FOR LINE NUMBER: PAGE 52 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. George William Armitage, Jr.

Mailing Address 12780 N. 57Th Street

City State Zip Code
Tampa FL 33617-1250

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00136

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Brad S. Armstrong

Mailing Address 61 Quail Drive

City State Zip Code
Roundup MT 59072-6339

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

Name of Employer Occupation
Thomson, Inc. Accountant

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00137

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Cynthia Armstrong

Mailing Address 7701 Old Telegraph Road

City State Zip Code
Alexandria VA 22315-3815

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

Name of Employer Occupation
Sparkle Painting Company Business Owner

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00138

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

525.00

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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thomas G. Arnett

Mailing Address 717 Roach

City State Zip Code
Salina KS 67401-5126

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

Name of Employer
Thomas G. Arnett, Cpa, P.-A.

Occupation
Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

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

Transaction ID: 2009M04L11ai00139

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Stuart B. Aronoff

Mailing Address 2652 Pierce Street

City State Zip Code
San Francisco CA 94123-4631

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

Name of Employer
Retired

Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00140

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Ceasar A. Arredondo

Mailing Address 445 Grand Bay Drive

City State Zip Code
Key Biscayne FL 33149-1905

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

Name of Employer
Self-Employed

Occupation
Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00141

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional) ► **10300.00**

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 54 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. H. Raymond Arsenault

Mailing Address 119 Hampton Meadows

City State Zip Code
 Hampton NH 03842-1818

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00142

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
 Ms. Barbara Arthurs

Mailing Address 3000 Pennypack Road

City State Zip Code
 Hatboro PA 19040-4212

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

Name of Employer Merck Occupation Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 06 / 2009

Transaction ID: 2009M04L11ai00143

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
 Dr. & Mrs. Ricardo & Bonnie Artigas

Mailing Address 2270 Sanderling Lane

City State Zip Code
 Vero Beach FL 32963-9495

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

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

Transaction ID: 2009M04L11ai00144

Amount of Each Receipt this Period
 1500.00

SUBTOTAL of Receipts This Page (optional) ► **1700.00**

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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Douglas W. Ashcraft

Mailing Address 20 Phellos Court

City State Zip Code
Little Rock AR 72223-3960

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

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00145

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Marion A. Askin, Jr.

Mailing Address 104 Cherry Point Drive

City State Zip Code
Yorktown VA 23692-3538

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

Name of Employer Occupation
U.S. Army Military Systems Integrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.00

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

Transaction ID: 2009M04L11ai00146

Amount of Each Receipt this Period
144.00

C. Full Name (Last, First, Middle Initial)
Mr. Marion A. Askin, Jr.

Mailing Address 104 Cherry Point Drive

City State Zip Code
Yorktown VA 23692-3538

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

Name of Employer Occupation
U.S. Army Military Systems Integrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 499.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00147

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 1244.00

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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Carl Asplundh, Jr.
Mailing Address 7049 Ely Road

City State Zip Code
New Hope PA 18938-5726

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

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

Transaction ID: 2009M04L11ai00148

Amount of Each Receipt this Period
180.00

B. Full Name (Last, First, Middle Initial)
Mr. Bill Athey
Mailing Address 2716 Redbird Lane

City State Zip Code
Enid OK 73703-1532

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

Name of Employer Security National Bank, Enid Ok. Occupation Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00149

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Miss Anita A. Atti
Mailing Address 1111 Bering Drive Unit 501

City State Zip Code
Houston TX 77057-2333

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00150

Amount of Each Receipt this Period
100.00

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 57 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Miss Anita A. Atti

Mailing Address 1111 Bering Drive
Unit 501

City State Zip Code
Houston TX 77057-2333

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai00151

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
Mr. Bruce Attinger

Mailing Address 19444 E. Lakeway Ave.

City State Zip Code
Baton Rouge LA 70810-8941

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

Name of Employer Occupation
Outback Steakhouse Restaurateur

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00152

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Jim Attrell

Mailing Address 50 Remington Ter.

City State Zip Code
Highland Vill TX 75077-6781

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

Name of Employer Occupation
Nortex Modular Space Vp and General Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00153

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **860.00**

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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Gordon Audilett

Mailing Address P.O. Box 292

City Thatcher State AZ Zip Code 85552-0292

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai00154
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard R. Augspurger

Mailing Address 12675 Willow Ln.

City Lakewood State CO Zip Code 80215-2548

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai00155
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. T. Avery

Mailing Address 10214 Ravenswood Road

City Granbury State TX Zip Code 76049-4538

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai00156
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 / 1945
(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
							17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thomas Avril

Mailing Address P.O. Box 32066

City State Zip Code
Cincinnati OH 45232-0066

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

Name of Employer Occupation
The G.A. Avril Company President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 2009M04L11ai00157

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
David Axene

Mailing Address 35067 Mahogany Glen Drive

City State Zip Code
Winchester CA 92596-8269

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

Name of Employer Occupation
Axene Health Partners, Llc Actuary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00158

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Miss Mary Sally Aylward

Mailing Address 115 S. Rutan Street
Apartment 10B

City State Zip Code
Wichita KS 67218-1135

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00159

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Ellen P. Ayotte

Mailing Address 1121 Coppet Street

City State Zip Code
Fairbanks AK 99709-4722

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

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

Transaction ID: 2009M04L11ai00160

Amount of Each Receipt this Period
375.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Donald N. Babb

Mailing Address P.O. Box 7777

City State Zip Code
Gardnerville NV 89460-4629

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00161

Amount of Each Receipt this Period
325.00

C. Full Name (Last, First, Middle Initial)
Ms. Karen Babish

Mailing Address 746 Golden Tanager Ct.

City State Zip Code
Greer SC 29651-7301

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00162

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 950.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Douglas A. Backes

Mailing Address 9903 Greening Court

City State Zip Code
Dunkirk MD 20754-9717

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

Name of Employer Occupation
U.S. Navy Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00163

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. John A. Backlund

Mailing Address 2255 N.W. Fernie Court

City State Zip Code
Bend OR 97701-8679

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00164

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. John N. Badgett, Jr.

Mailing Address 1109 N. Heritage Drive

City State Zip Code
Maryville TN 37803-6411

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00165

Amount of Each Receipt this Period
100.00

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

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

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

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

FOR LINE NUMBER: PAGE 62 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Arlene M. Bady

Mailing Address 1407 Middle Road
Unit #216

City State Zip Code
Calverton NY 11933-1471

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00166

Amount of Each Receipt this Period

150.00

B.

Full Name (Last, First, Middle Initial)
Mr. John C. Bagwell

Mailing Address 608 Garcia Street

City State Zip Code
Santa Fe NM 87505-2858

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

Name of Employer Requested Occupation Requested

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00167

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Lawrence E. Bailey

Mailing Address 4 Pond Edge Lane

City State Zip Code
Ipswich MA 01938-1070

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

Name of Employer New England Power Co. Occupation Ret.

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00168

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

900.00

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

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

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

FOR LINE NUMBER: PAGE 63 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Malcolm L. Bailey

Mailing Address 3662 Ontario Rd.
Suite B.

City State Zip Code
Keysville VA 23947-2710

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

Name of Employer S. & M. Brands, Inc. Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 2009M04L11ai00169

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark H. Bailey

Mailing Address 2930 Hayward Drive

City State Zip Code
Bellingham WA 98226-9461

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

Name of Employer Minefinders Corporation Ltd Occupation Geologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: 2009M04L11ai00170

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark H. Bailey

Mailing Address 2930 Hayward Drive

City State Zip Code
Bellingham WA 98226-9461

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

Name of Employer Minefinders Corporation Ltd Occupation Geologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00171

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Nona O. Bailey		Date of Receipt
	Mailing Address P.O. Box 769		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wells	TX	75976-9007
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai00172
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="300.00"/>

B.	Full Name (Last, First, Middle Initial) Mrs. Dorothy W. Baines		Date of Receipt
	Mailing Address 4137 W. Hamilton Court		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Nashville	TN	37218-1837
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai00173
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="125.00"/>

C.	Full Name (Last, First, Middle Initial) Mrs. Dorothy W. Baines		Date of Receipt
	Mailing Address 4137 W. Hamilton Court		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Nashville	TN	37218-1837
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai00174
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="50.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="475.00"/>
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 65 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Allen Baird

Mailing Address 1600 Texas Street #2035

City State Zip Code
Fort Worth TX 76102-3400

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00175

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Clayton D. Baird

Mailing Address 5955 Crab Orchard Rd

City State Zip Code
Houston TX 77057-1421

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00176

Amount of Each Receipt this Period
600.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bruce R. Baker

Mailing Address 5102 Sapphire Dr.

City State Zip Code
Marietta GA 30068-2891

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00177

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 66 / 1945
	<input checked="" 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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Grover Eugene Baker	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 645 V. O. A. Site C. Road	Transaction ID: 2009M04L11ai00178
	City State Zip Code Greenville NC 27834	Amount of Each Receipt this Period 245.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Unemployed	Occupation Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 785.00	

B.	Full Name (Last, First, Middle Initial) Mr. Grover Eugene Baker	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 645 V. O. A. Site C. Road	Transaction ID: 2009M04L11ai00179
	City State Zip Code Greenville NC 27834	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Unemployed	Occupation Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 785.00	

C.	Full Name (Last, First, Middle Initial) Keith & Martha Baker	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 1376 Brandlwood Road	Transaction ID: 2009M04L11ai00180
	City State Zip Code White Bear Lake MN 55110-2280	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Meritex	Occupation General Counsel	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	595.00
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 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Norman Baker

Mailing Address 40 Hanson Hollow Road

City State Zip Code
Port Allegany PA 16743-2302

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	9	

Transaction ID: 2009M04L11ai00181

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard Baker, III

Mailing Address P.O. Box 389

City State Zip Code
Sneads Ferry NC 28460-0389

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

Name of Employer Occupation
Treasure Realty, Inc. President/Broker-In-Charge

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00182

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard A. Baker

Mailing Address P.O. Box 972

City State Zip Code
Lake Oswego OR 97034-0107

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00183

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **825.00**

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 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert Baker		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address P.O. Box 108		Transaction ID: 2009M04L11ai00184		
	City Cedartown	State GA	Zip Code 30125-0108	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Duffey Southeast Inc	Occupation Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Robert W. Baker		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 24311 Oxnard Street		Transaction ID: 2009M04L11ai00185		
	City Woodland Hills	State CA	Zip Code 91367-1138	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Ms. Susan Baker		Date of Receipt MM / DD / YYYY 03 / 16 / 2009		
	Mailing Address 970 Pauite Drive		Transaction ID: 2009M04L11ai00186		
	City Ivins	State UT	Zip Code 84738-6466	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. Edward Balderston, Jr.
 Mailing Address 203 Willow Valley Drive
 City State Zip Code
Lancaster PA 17602-4781
 Date of Receipt
 M M / D D / Y Y Y Y
03 / 05 / 2009
Transaction ID: 2009M04L11ai00187
 Amount of Each Receipt this Period
200.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Susquehanna Bancshares, Inc. Banker
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **400.00**

B. Full Name (Last, First, Middle Initial)
 Mr. Edwin S. Baldwin
 Mailing Address 1 Dromara Road
 City State Zip Code
Saint Louis MO 63124-1816
 Date of Receipt
 M M / D D / Y Y Y Y
03 / 10 / 2009
Transaction ID: 2009M04L11ai00188
 Amount of Each Receipt this Period
100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Armstrong Teasdale, L.L.P. Lawyer
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **250.00**

C. Full Name (Last, First, Middle Initial)
 Mr. Edwin S. Baldwin
 Mailing Address 1 Dromara Road
 City State Zip Code
Saint Louis MO 63124-1816
 Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2009
Transaction ID: 2009M04L11ai00189
 Amount of Each Receipt this Period
150.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Armstrong Teasdale, L.L.P. Lawyer
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **250.00**

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 70 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Mark Balinski

Mailing Address 3 Princeton Court

City State Zip Code
Basking Ridge NJ 07920-4246

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

Name of Employer Zsl Inc. Occupation Sales/Mktg/Training

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: 2009M04L11ai00190

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Mr. Mark Balinski

Mailing Address 3 Princeton Court

City State Zip Code
Basking Ridge NJ 07920-4246

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

Name of Employer Zsl Inc. Occupation Sales/Mktg/Training

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00191

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Calvin L. Ball

Mailing Address 5925 SE 119th Place

City State Zip Code
Bellevue FL 34420-5230

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00192

Amount of Each Receipt this Period
500.00

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

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

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

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

FOR LINE NUMBER: PAGE 71 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David Ballard

Mailing Address 101 Riverside Park

City Abilene State TX Zip Code 79605-1752

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00193

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. James H. Ballew

Mailing Address P.O. Box 4084
Skyline Drive

City Frankfort State KY Zip Code 40604-4084

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai00194

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr. James H. Ballew

Mailing Address P.O. Box 4084
Skyline Drive

City Frankfort State KY Zip Code 40604-4084

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

Transaction ID: 2009M04L11ai00195

Amount of Each Receipt this Period
25.00

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 72 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. James H. Ballew

Mailing Address P.O. Box 4084
Skyline Drive

City State Zip Code
Frankfort KY 40604-4084

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00196

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Mr. James H. Ballew

Mailing Address P.O. Box 4084
Skyline Drive

City State Zip Code
Frankfort KY 40604-4084

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00197

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Wilfred F. Balmes

Mailing Address 440-County Road 5350

City State Zip Code
Berryville AR 72616

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00198

Amount of Each Receipt this Period
160.00

SUBTOTAL of Receipts This Page (optional) ► **210.00**

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 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

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

Mailing Address 511 E.San Yadidro Blvd #3402

City San Ysidro State CA Zip Code 92173

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

Name of Employer Self Occupation Aircraft Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00199

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Keith Bambrick

Mailing Address 14111 Freeway Dr.

City Santa Fe Springs State CA Zip Code 90670-5822

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

Name of Employer Hershey System Occupation Board Chariman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY 03 / 31 / 2009

Transaction ID: 2009M04L11ai00200

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Mr. George Banks

Mailing Address 13808 Fairlane Court

City Wellington State FL Zip Code 33414-6824

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY 03 / 25 / 2009

Transaction ID: 2009M04L11ai00201

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

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

Mailing Address P.O. Box 2867

City State Zip Code
Page AZ 86040-2867

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Page Dental Center Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

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

Transaction ID: 2009M04L11ai00202

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Louis F. Bantle

Mailing Address 11730 Valeros Court

City State Zip Code
Palm Beach Gardens FL 33418-1563

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00203

Amount of Each Receipt this Period 15000.00

C. Full Name (Last, First, Middle Initial)
Dr. Franc A. Barada, Jr.

Mailing Address 15 Beverly Drive

City State Zip Code
Durham NC 27707-2223

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 2009M04L11ai00204

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) 16100.00

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 75 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Mila Baranik

Mailing Address 35 Scott Drive

City Morganville State NJ Zip Code 07751-1036

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

Name of Employer Rom Bar Accounting Occupation Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai00205

Amount of Each Receipt this Period 80.00

B.

Full Name (Last, First, Middle Initial)
Mr. Cyril G. Barbaccia

Mailing Address 165 Blossom Hill Road

City San Jose State CA Zip Code 95123-5938

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai00206

Amount of Each Receipt this Period 2500.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Patricia J. Barbour

Mailing Address 3841 Legacy Drive

City Kingman State AZ Zip Code 86409-4905

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 04 / 2009

Transaction ID: 2009M04L11ai00207

Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► 2980.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James Barbre

Mailing Address 5743 Brookstone Drive N.W.

City Acworth State GA Zip Code 30101-8027

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

Name of Employer A.C.T. Technologies Inc. Occupation President & Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai00208
 Amount of Each Receipt this Period: 1100.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Wayne A. Barden

Mailing Address 1539 Cottonwood Drive

City Elkhart State IN Zip Code 46514-4331

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai00209
 Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Gradene & Ed Barham

Mailing Address 8205 Santa Fe Drive

City Odessa State TX Zip Code 79765-8541

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai00210
 Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ► 1650.00

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

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

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

FOR LINE NUMBER: PAGE 77 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Arthur Barker

Mailing Address 2813 John Coffee Court

City State Zip Code
Lake Ridge VA 22192-1221

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00211

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Frank R. Barnako

Mailing Address 2311 Kirkland Village Circle

City State Zip Code
Bethlehem PA 18017-4746

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

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

Transaction ID: 2009M04L11ai00212

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Diane C. Barnes

Mailing Address 3 Foxboro Road

City State Zip Code
Saint Louis MO 63124-1268

FEC ID number of contributing federal political committee. C

Name of Employer Homemaker Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00213

Amount of Each Receipt this Period 300.00

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 78 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Marion Barnes

Mailing Address P. O. Box 7456

City State Zip Code
Rocky Mount NC 27804-0456

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

Name of Employer Occupation
Frontier Trailer Assoc. Inc. Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00214

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Maria Barnette

Mailing Address 2181 Ahaku Place

City State Zip Code
Honolulu HI 96821-1012

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

Name of Employer Occupation
Bogart's Cafe Chef

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

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

Transaction ID: 2009M04L11ai00215

Amount of Each Receipt this Period
120.00

C. Full Name (Last, First, Middle Initial)
Mr. Allen Barney

Mailing Address 1354 Orchard Loop

City State Zip Code
Oak Harbor WA 98277-8905

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00216

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **920.00**

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

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

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

FOR LINE NUMBER: PAGE 79 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joshua Barnhill

Mailing Address 1416 Parkview Circle, #205

City State Zip Code
Wilmington NC 28405

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00217

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Jon T. Barnowski

Mailing Address 7607 Patapsco Drive

City State Zip Code
Sykesville MD 21784-7128

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

Name of Employer Siemens Occupation Account Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00218

Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
Mr. Jon T. Barnowski

Mailing Address 7607 Patapsco Drive

City State Zip Code
Sykesville MD 21784-7128

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

Name of Employer Siemens Occupation Account Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00219

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **355.00**

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

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

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

FOR LINE NUMBER: PAGE 80 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William Barrentine

Mailing Address 2 Nelson Lane

City State Zip Code
Pass Chris MS 39571-4718

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00220

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Mrs. Juanita Barrera

Mailing Address 2869 Camino Tomasini

City State Zip Code
Hacienda Heights CA 91745

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00221

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Mr. Tom H. Barrett

Mailing Address 8171 Bay Colony Drive
Penthouse N.

City State Zip Code
Naples FL 34108-7567

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 2009M04L11ai00222

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 81 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Mildred K. Barringer
Mailing Address 4912 Parkview Ct.
City State Zip Code
Tallahassee FL 32311-1240
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 9
Transaction ID: 2009M04L11ai00223
Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mrs. Mildred K. Barringer
Mailing Address 4912 Parkview Ct.
City State Zip Code
Tallahassee FL 32311-1240
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9
Transaction ID: 2009M04L11ai00224
Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert K. Barrow
Mailing Address P.O. Box 411
City State Zip Code
Springfield OR 97477-0063
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 9 / 2 0 0 9
Transaction ID: 2009M04L11ai00225
Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► 85.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dean Barry

Mailing Address 23699 Shaker Blvd.

City State Zip Code
Shaker Heights OH 44122-2606

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

Name of Employer Job Management Occupation Property Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1035.00

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

Transaction ID: 2009M04L11ai00226

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Dean Barry

Mailing Address 23699 Shaker Blvd.

City State Zip Code
Shaker Heights OH 44122-2606

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

Name of Employer Job Management Occupation Property Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1035.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00227

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Kathleen A. Barstnar

Mailing Address 1720 South Bellaire Suite 110

City State Zip Code
Denver CO 80222-4308

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

Name of Employer Whiting Management Resources Occupation President / C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: 2009M04L11ai00228

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **2035.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard Bartolotta

Mailing Address 167 Compo Road South

City State Zip Code
Westport CT 06880-5016

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

Name of Employer Occupation
Ims Health Vp, Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00229

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. David K. Barton

Mailing Address 80 Lyme Road
Apartment 1004

City State Zip Code
Hanover NH 03755-1236

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

Name of Employer Occupation
CACI International Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00230

Amount of Each Receipt this Period
500.00

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

Mailing Address 2051 Lake Viking Terr.

City State Zip Code
Gallatin MO 64640-8338

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

Name of Employer Occupation
Cameron Regional Medical Centre Surgeon

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00231

Amount of Each Receipt this Period
275.00

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 84 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert J. Basmadjian, Jr.
Mailing Address 4 Nevius Rd.
City State Zip Code
White House Statio NJ 08889-3916
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt MM / DD / YYYY
03 / 03 / 2009
Transaction ID: 2009M04L11ai00232
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Danny Basso
Mailing Address 15301 Dallas Parkway Suite 1100
City State Zip Code
Addison TX 75001
FEC ID number of contributing federal political committee. **C**
Name of Employer Systemware, Inc. Occupation Chief Executive Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt MM / DD / YYYY
03 / 27 / 2009
Transaction ID: 2009M04L11ai00233
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Ms. Rochelle H. Bast
Mailing Address 3704 N. Lake Drive
City State Zip Code
Shorewood WI 53211-2646
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt MM / DD / YYYY
03 / 04 / 2009
Transaction ID: 2009M04L11ai00234
Amount of Each Receipt this Period 100.00

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

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

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

FOR LINE NUMBER: PAGE 85 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Rochelle H. Bast

Mailing Address 3704 N. Lake Drive

City Shorewood State WI Zip Code 53211-2646

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai00235

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Rochelle H. Bast

Mailing Address 3704 N. Lake Drive

City Shorewood State WI Zip Code 53211-2646

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00236

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Ms. Susan E. Bate

Mailing Address 20 Trenton Avenue

City Ewing State NJ Zip Code 08628-2938

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

Name of Employer Bloomberg L.P. Occupation Research Asisst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00237

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 86 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mark & Kathy Batenic
 Mailing Address 97 Poteskeet Trail
 City State Zip Code
 Kitty Hawk NC 27949-3734
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2009
Transaction ID: 2009M04L11ai00238
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Clemens Family Markets Grocery Retail
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

B. Full Name (Last, First, Middle Initial)
 Mr. Frank Battaglino
 Mailing Address 2905 Ann Way
 City State Zip Code
 Owings MD 20736-4260
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2009
Transaction ID: 2009M04L11ai00239
 Amount of Each Receipt this Period
 2500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Self-Employed
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

C. Full Name (Last, First, Middle Initial)
 Mr. Ben G. Battle, Jr.
 Mailing Address 9950 Sea Grape Circle
 City State Zip Code
 Coral Gables FL 33156-3401
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2009
Transaction ID: 2009M04L11ai00240
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► **3000.00**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 87 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Melvin L. Battles, III

Mailing Address 33 Eagle Creek Drive

City State Zip Code
Norwalk OH 44857-8850

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00241

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Abraham S. Baubie

Mailing Address 218 Kentucky St

City State Zip Code
Bakersfield CA 93305

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00242

Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial)
Mrs. Veronica Bauch

Mailing Address 218 E. Blue Earth Avenue

City State Zip Code
Fairmont MN 56031-2847

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 2009M04L11ai00243

Amount of Each Receipt this Period
60.00

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

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

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

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

FOR LINE NUMBER: PAGE 88 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Veronica Bauch

Mailing Address 218 E. Blue Earth Avenue

City Fairmont State MN Zip Code 56031-2847

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai00244

Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert Baum

Mailing Address 990 Garrido Drive

City Camarillo State CA Zip Code 93010-1026

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 11 / 2009

Transaction ID: 2009M04L11ai00245

Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
Mrs. Alice Baumgartner

Mailing Address 2886 Highland Avenue

City Broomall State PA Zip Code 19008-1059

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

Name of Employer Tri-State Elevator Occupation Clerical

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 25 / 2009

Transaction ID: 2009M04L11ai00246

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 940.00

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 89 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Melanie A. Bavouset		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 387 E. Log Hill Road		Transaction ID: 2009M04L11ai00247		
	City Pagosa Springs	State CO	Zip Code 81147-9000	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 225.00		

B.	Full Name (Last, First, Middle Initial) Ms. Melanie A. Bavouset		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 387 E. Log Hill Road		Transaction ID: 2009M04L11ai00248		
	City Pagosa Springs	State CO	Zip Code 81147-9000	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 225.00		

C.	Full Name (Last, First, Middle Initial) Ms. Melanie A. Bavouset		Date of Receipt MM / DD / YYYY 03 / 31 / 2009		
	Mailing Address 387 E. Log Hill Road		Transaction ID: 2009M04L11ai00249		
	City Pagosa Springs	State CO	Zip Code 81147-9000	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 225.00		

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 90 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Ralph Beadle
Mailing Address 7215 77Th Street
City Lubbock State TX Zip Code 79424-0733
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai00250
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mrs. Connie Beal
Mailing Address 3855 Valley View Drive
City Cedar Hills State UT Zip Code 84062-8001
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00251
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Ms. Janice Beal
Mailing Address 14106 Timberline Drive
City Urbandale State IA Zip Code 50323-1724
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 255.00
Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai00252
Amount of Each Receipt this Period 255.00

SUBTOTAL of Receipts This Page (optional) ▶ 705.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Webber W. Beall, Jr.
Mailing Address 4317 Edmonson Avenue

City Dallas	State TX	Zip Code 75205-2601
-----------------------	--------------------	-------------------------------

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

Name of Employer Self-Employed	Occupation Self-Employed
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai00253
 Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Jim Bean
Mailing Address 1115 South Street

City Key West	State FL	Zip Code 33040-4807
-------------------------	--------------------	-------------------------------

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

Name of Employer Self-Employed	Occupation Self-Employed
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai00254
 Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. John E. Bear
Mailing Address 24 Fieldstone

City Halliesburg	State MS	Zip Code 39402-8694
----------------------------	--------------------	-------------------------------

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

Name of Employer Environmental Construction Corporation	Occupation Presidentanager
--	-------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai00255
 Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Jimmie L. Beasley

Mailing Address P.O. Box 911

City State Zip Code
Covington TN 38019-0911

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

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00256

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Bruce Beatty

Mailing Address 3010 Stillmeadow Drive

City State Zip Code
Collegetown PA 19426-3248

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

Name of Employer Occupation
Z.L.B. Behring Production Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00257

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Deborah Beatty

Mailing Address 10508 Hunting Crest Lane

City State Zip Code
Vienna VA 22182-1522

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00258

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1400.00

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

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

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

FOR LINE NUMBER: PAGE 93 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Carolyn Beaubouef
Mailing Address 2512 Highway 5
City State Zip Code
Grand Cane LA 71032-6118
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9
Transaction ID: 2009M04L11ai00259
Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Diana L. Becker
Mailing Address 229 Manley Ct
City State Zip Code
San Jose CA 95139-1432
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Merrill Lynch Mortgage Banker
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9
Transaction ID: 2009M04L11ai00260
Amount of Each Receipt this Period
210.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark Becker
Mailing Address 165 Barrett Place
City State Zip Code
Alexandria VA 22304-7765
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Department Of Defense Civil Servant
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 9
Transaction ID: 2009M04L11ai00261
Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 410.00
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 94 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James Becraft

Mailing Address 8210 Silent River Drive

City Richmond State TX Zip Code 77406-7168

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

Name of Employer Kaiser Aluminum Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai00262
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. David Bego

Mailing Address P.O. Box 501796

City Indianapolis State IN Zip Code 46250-6796

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: 2009M04L11ai00263
 Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Ms. Sharon Begosh

Mailing Address 18922 Clover Hill Lane

City Olney State MD Zip Code 20832-1211

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

Name of Employer Montgomery County Government Occupation Corrections Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai00264
 Amount of Each Receipt this Period: 50.00

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 95 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Col. Richard P. Bein

Mailing Address 7902 Foote Lane

City Springfield State VA Zip Code 22151-2405

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

Name of Employer U.S. Army Occupation Military Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt MM / DD / YYYY 03 / 26 / 2009

Transaction ID: 2009M04L11ai00265

Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Mr. Bruce A. Bell

Mailing Address 600 Heritage Road
Belmark Inc

City De Pere State WI Zip Code 54115-2444

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

Name of Employer Belmark Inc Occupation Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY 03 / 17 / 2009

Transaction ID: 2009M04L11ai00266

Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
Ms. Linda L. Bell

Mailing Address 1798 Hartford Turnpike

City North Haven State CT Zip Code 06473-1271

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

Name of Employer Paul C. Higgins, Inc. Occupation Assistant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

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

Transaction ID: 2009M04L11ai00267

Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) ► 495.00

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 96 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Gary D. Bello		Date of Receipt MM / DD / YYYY 03 / 31 / 2009		
	Mailing Address 727 Mallard Bay		Transaction ID: 2009M04L11ai00268		
	City Lexington	State KY	Zip Code 40502-3122	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer None	Occupation Self Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Harold Belsheim		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 1002 E. Wesley Drive		Transaction ID: 2009M04L11ai00269		
	City O' Fallon	State IL	Zip Code 62269-6136	Amount of Each Receipt this Period 505.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation Self-Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 505.00			

C.	Full Name (Last, First, Middle Initial) Mrs. Patricia J. Beltrami		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 145 Mendocino Place		Transaction ID: 2009M04L11ai00270		
	City Ukiah	State CA	Zip Code 95482-5612	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional)	▶	1255.00
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 97 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Kimberly Benacquista

Mailing Address 130 Fox Meadow Lane

City Orchard Park State NY Zip Code 14127-2866

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai00271
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. A. T. Benavides

Mailing Address P.O. Box 1

City Bruni State TX Zip Code 78344-0001

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai00272
Amount of Each Receipt this Period: 220.00

C. Full Name (Last, First, Middle Initial)
Mr. A. T. Benavides

Mailing Address P.O. Box 1

City Bruni State TX Zip Code 78344-0001

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 830.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: 2009M04L11ai00273
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ► **770.00**

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 98 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Bruce P. Bengtson

Mailing Address 91 Cardinal Road

City State Zip Code
Wyomissing PA 19610-2517

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00274

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Bruce P. Bengtson

Mailing Address 91 Cardinal Road

City State Zip Code
Wyomissing PA 19610-2517

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00275

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. David Benham

Mailing Address 4460 Malana Court

City State Zip Code
Rancho Cordova CA 95742-8060

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00276

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 99 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David Benham

Mailing Address 4460 Malana Court

City Rancho Cordova State CA Zip Code 95742-8060

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai00277
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. David Benham

Mailing Address 4460 Malana Court

City Rancho Cordova State CA Zip Code 95742-8060

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai00278
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Herb and Jane Benjey

Mailing Address 168 Rainbow Dr # 6820

City Livingston State TX Zip Code 77399-1068

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

Name of Employer University Hospital, Cincinnati Occupation Jane--Data Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai00279
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 100 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Herb and Jane Benjey

Mailing Address 168 Rainbow Dr # 6820

City State Zip Code
Livingston TX 77399-1068

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

Name of Employer Occupation
University Hospital, Cinc- Jane--Data Analyst
Innat

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00280

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph Bennett

Mailing Address 4 Green Tree Place

City State Zip Code
Sheldon SC 29941

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

Name of Employer Occupation
Requested Requested

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

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

Transaction ID: 2009M04L11ai00281

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Kent Bennett

Mailing Address 8611 Kenosha Drive

City State Zip Code
Lubbock TX 79423-2728

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00282

Amount of Each Receipt this Period
250.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Richard B. Bennett

Mailing Address 7303 Periwinkle Drive

City State Zip Code
Sarasota FL 34231-5321

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

Name of Employer Self-Employed Occupation Self-Employed

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai00283

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Ronald P. Bennett

Mailing Address 280 Parkdale Ave.

City State Zip Code
East Aurora NY 14052-1619

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

Name of Employer Requested Occupation Requested

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai00284

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Sandra S. Bennett

Mailing Address P.O. Box 409

City State Zip Code
La Center WA 98629-0409

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

Name of Employer Retired Occupation Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00285

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ►

800.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Arnie Benning

Mailing Address 1719 Easton Avenue

City Waterloo State IA Zip Code 50702-2642

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

Name of Employer Don Lentz Heating & Cooling Occupation Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai00286

Amount of Each Receipt this Period 105.00

B. Full Name (Last, First, Middle Initial)
Arnie Benning

Mailing Address 1719 Easton Avenue

City Waterloo State IA Zip Code 50702-2642

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

Name of Employer Don Lentz Heating & Cooling Occupation Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai00287

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. T. R. Benning

Mailing Address P.O. Box 724375

City Atlanta State GA Zip Code 31139-1375

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

Name of Employer Benning Construction Company Occupation Constructor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai00288

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 705.00

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 103 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Deward E. Bennton

Mailing Address 903 Minutemen Crossway

City State Zip Code
Cocoa Beach FL 32931

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai00289
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Linn Benson

Mailing Address 1

City State Zip Code
Napa CA 94558

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

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai00290
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Ms. Joan Sidie Bentzen

Mailing Address 353 Kentucky Avenue

City State Zip Code
Sheridan WY 82801-3316

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai00291
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 700.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Joan Sidie Bentzen

Mailing Address 353 Kentucky Avenue

City State Zip Code
Sheridan WY 82801-3316

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00292

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Ronald L. Berenstain

Mailing Address 518 Hillside Drive E.

City State Zip Code
Seattle WA 98112-5054

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

Name of Employer Occupation
Perkins Crie L.L.P. Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

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

Transaction ID: 2009M04L11ai00293

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph Beres

Mailing Address 108 Vista Lane

City State Zip Code
Taos NM 87571-7252

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: 2009M04L11ai00294

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Orville R. Berg		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 400 Travis St Ste 616 Berex-Co Inc		Transaction ID: 2009M04L11ai00295		
	City Shreveport	State LA	Zip Code 71101-3112	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer Self-Employed		Occupation Self-Employed		

B.	Full Name (Last, First, Middle Initial) Ms. Elizabeth P. Bergbower		Date of Receipt MM / DD / YYYY 03 / 04 / 2009		
	Mailing Address 102 Glenmoor Circle S.		Transaction ID: 2009M04L11ai00296		
	City Easton	State PA	Zip Code 18045-2178	Amount of Each Receipt this Period 360.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer Retired		Occupation Retired		

C.	Full Name (Last, First, Middle Initial) Mr. Brent C. Berge		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 2052 E. Hermosa Vista Drive		Transaction ID: 2009M04L11ai00297		
	City Mesa	State AZ	Zip Code 85213-2212	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer Self-Employed		Occupation Self-Employed		

SUBTOTAL of Receipts This Page (optional)	1110.00
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 106 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Susan C. Berger

Mailing Address 44 Reynolds Street

City State Zip Code
Kingston PA 18704-4725

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

Name of Employer Occupation
Matthew Berger Assistant Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00298

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Leo W. Bergin

Mailing Address 10528 Big Canoe

City State Zip Code
Big Canoe GA 30143-5127

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00299

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael J. Berkich

Mailing Address 209 Mason Street

City State Zip Code
Onalaska WI 54650-7034

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

Name of Employer Occupation
Body Shop Supply Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00300

Amount of Each Receipt this Period
100.00

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

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

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

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

FOR LINE NUMBER: PAGE 107 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Alan E. Berlin

Mailing Address P.O. Box 5588

City State Zip Code
Beverly Hills CA 90209-5588

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

Name of Employer Occupation
Jules Berlin Agency Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: 2009M04L11ai00301

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Clevence J Bernard, Jr.

Mailing Address 4217 Pine Park Dr.

City State Zip Code
Baton Rouge LA 70809

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00302

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles Berry

Mailing Address 1050 Calle Milagro Dr.

City State Zip Code
El Paso TX 79912-7521

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

Name of Employer Occupation
Good Times Store President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00303

Amount of Each Receipt this Period
100.00

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 108 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Gladys D. Berry		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address 1011 Tulip Street		Transaction ID: 2009M04L11ai00304		
	City Longmont	State CO	Zip Code 80501-4121	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested		Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Ms. Mary Ann Berry		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 4030 Timber Lane		Transaction ID: 2009M04L11ai00305		
	City Orlando	State FL	Zip Code 32804-2236	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

C.	Full Name (Last, First, Middle Initial) Mr. William J. Berry		Date of Receipt MM / DD / YYYY 03 / 05 / 2009		
	Mailing Address 12001 Peach Drive		Transaction ID: 2009M04L11ai00306		
	City Pampa	State TX	Zip Code 79065-1117	Amount of Each Receipt this Period 825.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 825.00			

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 109 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John Bertram

Mailing Address 56160 Muirfield Village

City State Zip Code
La Quinta CA 92253-7690

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: 2009M04L11ai00307

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Dudley J. Bertrand

Mailing Address 111 Dupont Circle

City State Zip Code
West Monroe LA 71291-4715

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 940.00

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

Transaction ID: 2009M04L11ai00308

Amount of Each Receipt this Period
220.00

C. Full Name (Last, First, Middle Initial)
Mr. Dudley J. Bertrand

Mailing Address 111 Dupont Circle

City State Zip Code
West Monroe LA 71291-4715

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 940.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00309

Amount of Each Receipt this Period
200.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 110 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joseph F. Best, III

Mailing Address 2279 Defoor Hills Road N.W.

City Atlanta State GA Zip Code 30318-2203

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

Name of Employer: Quality Wine & Spirits, Inc. Occupation: President/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 24 / 2009

Transaction ID: 2009M04L11ai00310

Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Mr. David R. Bettis

Mailing Address 2403 Carey Lane

City Vienna State VA Zip Code 22181-5444

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

Name of Employer: Retired Occupation: Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 26 / 2009

Transaction ID: 2009M04L11ai00311

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Frank F. Bevacqua

Mailing Address 317 Forester Way

City Park Ridge State NJ Zip Code 07656-2611

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

Name of Employer: Retired Occupation: Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 03 / 2009

Transaction ID: 2009M04L11ai00312

Amount of Each Receipt this Period: 220.00

SUBTOTAL of Receipts This Page (optional) ▶ **770.00**

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 111 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Barbara Beyea

Mailing Address 12 Whale Cove Road

City State Zip Code
Rockport MA 01966-1920

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai00313

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Barbara Beyea

Mailing Address 12 Whale Cove Road

City State Zip Code
Rockport MA 01966-1920

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00314

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Ms. Sherry Lee Bezzek

Mailing Address 6 Teaberry Drive

City State Zip Code
Medford NJ 08055-3601

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

Name of Employer Occupation
Emergency Medicine Assoc. Company C.E.O.

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00315

Amount of Each Receipt this Period

150.00

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 112 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Kenneth J. Bialkin

Mailing Address 4 Times Sqare

City State Zip Code
New York NY 10036

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

Name of Employer Requested Occupation Requested

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai00316

Amount of Each Receipt this Period
250.00

B.

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

Mailing Address 5000 Numaga Pass

City State Zip Code
Carson City NV 89703-9454

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai00317

Amount of Each Receipt this Period
800.00

C.

Full Name (Last, First, Middle Initial)
Captain Ted Biddison

Mailing Address 102 Shockey Circle

City State Zip Code
Winchester VA 22602-6857

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 18 / 2009

Transaction ID: 2009M04L11ai00318

Amount of Each Receipt this Period
210.00

SUBTOTAL of Receipts This Page (optional)

1260.00

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 113 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Ingeborg Bieber

Mailing Address 102 Derry Hill Road

City State Zip Code
Uncasville CT 06382-1904

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00319

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Bruce A. Biehler

Mailing Address 10619 N. La Quinta Drive

City State Zip Code
Tucson AZ 85737-7017

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00320

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Bruce A. Biehler

Mailing Address 10619 N. La Quinta Drive

City State Zip Code
Tucson AZ 85737-7017

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00321

Amount of Each Receipt this Period
275.00

SUBTOTAL of Receipts This Page (optional) ► **425.00**

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 114 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. William Biermann
 Mailing Address 743 Maple Hill Drive
 City State Zip Code
 Blue Bell PA 19422-2064
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2009
Transaction ID: 2009M04L11ai00322
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Cantor, Biermann, Fellin Physician
 Assoc
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

B. Full Name (Last, First, Middle Initial)
 Mr. James M. Biggar
 Mailing Address 4199 Kinross Lakes Parkway
 Apartment 250
 City State Zip Code
 Richfield OH 44286-9396
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2009
Transaction ID: 2009M04L11ai00323
 Amount of Each Receipt this Period
 200.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-Employed Self-Employed
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 400.00

C. Full Name (Last, First, Middle Initial)
 Mr. Arthur E. Biggs
 Mailing Address 801 S.W. San Antonio Drive
 City State Zip Code
 Palm City FL 34990-5971
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 09 / 2009
Transaction ID: 2009M04L11ai00324
 Amount of Each Receipt this Period
 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Requested Requested
 Receipt For: Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

SUBTOTAL of Receipts This Page (optional) ► **725.00**

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 115 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Arthur E. Biggs

Mailing Address 801 S.W. San Antonio Drive

City State Zip Code
Palm City FL 34990-5971

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00325

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Sheridan C. Biggs

Mailing Address P.O. Box 160

City State Zip Code
Quaker Street NY 12141-0160

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00326

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. John Bikowski

Mailing Address 1701 Fox Run Court

City State Zip Code
Vienna VA 22182-1810

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00327

Amount of Each Receipt this Period
300.00

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 116 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Gwenn L. Billinger
Mailing Address 445 Colonial Place
City Nipomo State CA Zip Code 93444-5718
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00328
Amount of Each Receipt this Period 180.00

B. Full Name (Last, First, Middle Initial)
Mrs. Gwenn L. Billinger
Mailing Address 445 Colonial Place
City Nipomo State CA Zip Code 93444-5718
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai00329
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas Billings
Mailing Address 34 W. Rivercrest Drive
City Houston State TX Zip Code 77042-2135
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai00330
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 380.00
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 117 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Thomas Billings	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 34 W. Rivercrest Drive	Transaction ID: 2009M04L11ai00331
	City State Zip Code Houston TX 77042-2135	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Fred C. Birkeland	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 509 Route 530 Apartment 166	Transaction ID: 2009M04L11ai00332
	City State Zip Code Whiting NJ 08759-3147	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Lou L. Birney	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 1625 E. 32Nd Street #1	Transaction ID: 2009M04L11ai00333
	City State Zip Code Brooklyn NY 11234-4212	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1375.00	

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 118 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Lou L. Birney

Mailing Address 1625 E. 32Nd Street #1

City Brooklyn State NY Zip Code 11234-4212

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1375.00

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

Transaction ID: 2009M04L11ai00334

Amount of Each Receipt this Period 50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Lou L. Birney

Mailing Address 1625 E. 32Nd Street #1

City Brooklyn State NY Zip Code 11234-4212

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1375.00

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

Transaction ID: 2009M04L11ai00335

Amount of Each Receipt this Period 200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Johnnie T. Bishop, Sr.

Mailing Address 53 Farmington Drive

City Staunton State VA Zip Code 24401-6272

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

Name of Employer Fisher Auto Parts Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

Transaction ID: 2009M04L11ai00336

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► **350.00**

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

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

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

FOR LINE NUMBER: PAGE 119 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Lucille S. Bishop

Mailing Address 25 Bishop Street

City State Zip Code
De Lancey NY 13752-2188

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00337

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Patrick Bishop

Mailing Address 1130 Reserve Way #204

City State Zip Code
Naples FL 34105

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

Name of Employer Titan Consulting, Llc Occupation President & Ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00338

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. William H. Bishop

Mailing Address 6825 S.W. Raleighwood Lane

City State Zip Code
Portland OR 97225-1924

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00339

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ► **495.00**

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 120 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Errol Bisutti

Mailing Address 489 Gray Court

City Benicia State CA Zip Code 94510-3923

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

Name of Employer Underground Construction Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00340
Amount of Each Receipt this Period 280.00

B. Full Name (Last, First, Middle Initial)
Mr. R. Richard Bittner

Mailing Address 1000 Firstar Center

City Davenport State IA Zip Code 52801

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai00341
Amount of Each Receipt this Period 1000.00

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

Mailing Address 412 Sebastian Square

City St. Augustine State FL Zip Code 32095-6863

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

Name of Employer Self Occupation Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai00342
Amount of Each Receipt this Period 30.00

SUBTOTAL of Receipts This Page (optional) ► 1310.00

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 121 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Patricia S. Blackbourne		Date of Receipt MM / DD / YYYY 03 / 30 / 2009		
	Mailing Address 705 Schubert Road		Transaction ID: 2009M04L11ai00343		
	City Kingsbury	State TX	Zip Code 78638-3202	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Na	Occupation At Home Mom			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mrs. Merida Blackwell		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address P.O. Box 673		Transaction ID: 2009M04L11ai00344		
	City Conifer	State CO	Zip Code 80433-0673	Amount of Each Receipt this Period 75.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			

C.	Full Name (Last, First, Middle Initial) Mrs. Merida Blackwell		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address P.O. Box 673		Transaction ID: 2009M04L11ai00345		
	City Conifer	State CO	Zip Code 80433-0673	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			

SUBTOTAL of Receipts This Page (optional)	▶	425.00
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 122 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Sherwood C. Blake Mailing Address 2 Sutton Place S. Apartment 6 A. City State Zip Code New York NY 10022-3070 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2009 Transaction ID: 2009M04L11ai00346 Amount of Each Receipt this Period 500.00
B.	Full Name (Last, First, Middle Initial) Mr. Miles G. Blakeslee, Jr. Mailing Address 2255 Ridge Road City State Zip Code North Haven CT 06473-1216 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2009 Transaction ID: 2009M04L11ai00347 Amount of Each Receipt this Period 100.00
C.	Full Name (Last, First, Middle Initial) Mr. Gregory R. Blank Mailing Address 20368 N. 93Rd Place City State Zip Code Scottsdale AZ 85255-6619 FEC ID number of contributing federal political committee. C Name of Employer Summit Holdings, Inc. Occupation Investor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2009 Transaction ID: 2009M04L11ai00348 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶

850.00

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

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

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

FOR LINE NUMBER: PAGE 123 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Gail Blanton

Mailing Address 3069 Dartmouth Drive

City Greenville State NC Zip Code 27858-6746

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00349
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. David H. Blattner, Jr.

Mailing Address 23764 County Road 12

City Richmond State MN Zip Code 56368-8355

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

Name of Employer Blattner & Sons, Inc. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai00350
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert A. Bliss

Mailing Address 316 Woods Mill Terrace Lane

City Chesterfield State MO Zip Code 63017-3440

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai00351
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George E. Block, Jr.
Mailing Address 2402 Benrus Blvd.

City San Antonio	State TX	Zip Code 78228-2338
----------------------------	--------------------	-------------------------------

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

Name of Employer Northside I.S.D.	Occupation Assistant Director Of Athletics
--------------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai00352
Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. George E. Block, Jr.
Mailing Address 2402 Benrus Blvd.

City San Antonio	State TX	Zip Code 78228-2338
----------------------------	--------------------	-------------------------------

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

Name of Employer Northside I.S.D.	Occupation Assistant Director Of Athletics
--------------------------------------	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai00353
Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Remo Capra Bloise
Mailing Address 163 E. 92Nd Street

City New York	State NY	Zip Code 10128-2420
-------------------------	--------------------	-------------------------------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai00354
Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional)	255.00
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 125 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Mina Bloom

Mailing Address 61 Lower Cross Road

City State Zip Code
Greenwich CT 06831-3001

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

Name of Employer: Trans-Continental Credit Collection Co
Occupation: Secretary / Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai00355
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Ms. Mina Bloom

Mailing Address 61 Lower Cross Road

City State Zip Code
Greenwich CT 06831-3001

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

Name of Employer: Trans-Continental Credit Collection Co
Occupation: Secretary / Treasurer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai00356
 Amount of Each Receipt this Period: 105.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles Bloomquist

Mailing Address 1615 California St., Suite 307

City State Zip Code
Denver CO 80202-3722

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

Name of Employer: Resource Consulting Int'L
Occupation: Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai00357
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **405.00**

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 126 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Brenda Blot

Mailing Address 575 Park Avenue

City State Zip Code
New York NY 10065-7323

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00358

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Howard E. Blum

Mailing Address 3 Harbour Point Drive

City State Zip Code
Northport NY 11768-1557

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00359

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Howard E. Blum

Mailing Address 3 Harbour Point Drive

City State Zip Code
Northport NY 11768-1557

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00360

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: (check only one)	PAGE 127 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Emily S. Blunt		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 19812 Genito Road		Transaction ID: 2009M04L11ai00361		
	City Moseley	State VA	Zip Code 23120-1082	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

B.	Full Name (Last, First, Middle Initial) Mr. George Bodin		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address 337 Woodside Avenue		Transaction ID: 2009M04L11ai00362		
	City Franklin Lakes	State NJ	Zip Code 07417-2030	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Oltron Incorporated	Occupation Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

C.	Full Name (Last, First, Middle Initial) Tracy Boesch		Date of Receipt MM / DD / YYYY 03 / 27 / 2009		
	Mailing Address 21115 Crystal Greens Drive		Transaction ID: 2009M04L11ai00363		
	City Katy	State TX	Zip Code 77450-8651	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Transtech Medical Solutions	Occupation President and Coo			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 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 128 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stephen W. Boesel

Mailing Address 23 Seminary Farm Road

City State Zip Code
Lutherville Timoni MD 21093-4548

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

Name of Employer Occupation
Unemployed Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: 2009M04L11ai00364

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Miss Deborah A. Boghosian

Mailing Address 4 Coronet Court

City State Zip Code
Schenectady NY 12309-1929

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

Name of Employer Occupation
Dynacare Laboratories Medical Technologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00365

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Pam Boker

Mailing Address 719 Bedford Road

City State Zip Code
Mount Kisco NY 10549

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

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

Transaction ID: 2009M04L11ai00366

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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 129 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Pam Boker

Mailing Address 719 Bedford Road

City State Zip Code
Mount Kisco NY 10549

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

Name of Employer Occupation
Self-Employed Self-Employed

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai00367

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steve Bolen

Mailing Address 8685 Traveling Breeze Avenue
Unit 102

City State Zip Code
Las Vegas NV 89178-7707

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

Name of Employer Occupation
Desert Cab Taxidriver

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai00368

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. John H. Bolin, Sr.

Mailing Address 7869 Main Hwy.

City State Zip Code
St. Martinville LA 70582-7807

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

Name of Employer Occupation
Edg Prof. Engineer

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai00369

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

350.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 130 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John H. Bolin, Sr.
Mailing Address 7869 Main Hwy.
City St. Martinville State LA Zip Code 70582-7807
FEC ID number of contributing federal political committee. **C**
Name of Employer Edg Occupation Prof. Engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 25 / 2009
Transaction ID: 2009M04L11ai00370
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. William R Bollin
Mailing Address 8729 Big Cypress Circle
City Sylvania State OH Zip Code 43560-8919
FEC ID number of contributing federal political committee. **C**
Name of Employer The Bostwick-Braun Company Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai00371
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey W. Bolton
Mailing Address 1003 Hunters Point Lane SW
City Rochester State MN Zip Code 55902-3481
FEC ID number of contributing federal political committee. **C**
Name of Employer Mayo Clinic Occupation Administrator
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00372
Amount of Each Receipt this Period 250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 131 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. William G. Bonozo

Mailing Address 20229 Inland Lane

City Malibu State CA Zip Code 90265-5319

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 27 / 2009

Transaction ID: 2009M04L11ai00374

Amount of Each Receipt this Period 220.00

B. Full Name (Last, First, Middle Initial)
Rev. John W. Bookout

Mailing Address P.O. Box 76

City Hartley State TX Zip Code 79044-0076

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

Name of Employer Hartley Christian Fellowship Occupation Pastor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 27 / 2009

Transaction ID: 2009M04L11ai00375

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Dan W. Boone, III

Mailing Address 2660 Peachtree Road
Apartment 35H

City Atlanta State GA Zip Code 30305-3682

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

Name of Employer Atlanta Capital Management Company Occupation Investment Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai00376

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 720.00

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 132 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Richard W. Booth	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 11 Resplandor Place	Transaction ID: 2009M04L11ai00377
	City State Zip Code Hot Springs Villag AR 71909-7724	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Gertraud A. Bopp	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 301 Arbor Court	Transaction ID: 2009M04L11ai00378
	City State Zip Code Tinton Falls NJ 07753-7761	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Gertraud A. Bopp	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 301 Arbor Court	Transaction ID: 2009M04L11ai00379
	City State Zip Code Tinton Falls NJ 07753-7761	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 215.00	

SUBTOTAL of Receipts This Page (optional)	1065.00
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 133 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Gertraud A. Bopp

Mailing Address 301 Arbor Court

City State Zip Code
Tinton Falls NJ 07753-7761

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai00380

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Robert L. Border

Mailing Address 6650 W. Flamingo Road
Apartment 221

City State Zip Code
Las Vegas NV 89103-2144

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00381

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)

Dr. Wayne Border

Mailing Address 556 Purple Lilac Ln.

City State Zip Code
Sandy UT 84070-6200

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

Name of Employer Occupation
University Of Ufah Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 380.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00382

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 134 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Scott Born		Date of Receipt
	Mailing Address 19934 Ne 155th St		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Woodinville	WA	98077-7702
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 2009M04L11ai00383
Name of Employer Black Lowe and Graham Plc		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="75.00"/>
		<input type="text" value="225.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. Darrell E. Borne		Date of Receipt
	Mailing Address 561 Gramercy Drive N.E.		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Marietta	GA	30068-4872
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 2009M04L11ai00384
Name of Employer Sciele Pharma, Inc.		Occupation Cfo	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	

C.	Full Name (Last, First, Middle Initial) Mr. Hans S. Borov		Date of Receipt
	Mailing Address 3882 Burrsville Rd		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Harrington	DE	19952-4627
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 2009M04L11ai00385
Name of Employer N/A		Occupation Ret.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="210.00"/>
		<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1285.00"/>
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 135 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. P. C. Borra

Mailing Address P.O. Box 854

City

Harbor Springs

State

MI

Zip Code

49740-0854

FEC ID number of contributing federal political committee.

C

Name of Employer
Cola Health Services, Inc.

Occupation
Business Executive

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00386

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Ronald A. Boss

Mailing Address 977 Coach Way

City

Annapolis

State

MD

Zip Code

21401-6413

FEC ID number of contributing federal political committee.

C

Name of Employer
Ret.

Occupation
Ret.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00387

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Ronald A. Boss

Mailing Address 977 Coach Way

City

Annapolis

State

MD

Zip Code

21401-6413

FEC ID number of contributing federal political committee.

C

Name of Employer
Ret.

Occupation
Ret.

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00388

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1150.00

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 136 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Daniel Bosworth

Mailing Address P. O. Box 103

City State Zip Code
White Lake SD 57383-0103

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00389

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Aubrey J. Bourgeois

Mailing Address 10100 Hillview Drive
Apartment 608

City State Zip Code
Pensacola FL 32514-5460

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00390

Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary Jo Bousek

Mailing Address 2001 S. 24Th Street

City State Zip Code
Lincoln NE 68502-3010

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00391

Amount of Each Receipt this Period 300.00

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 137 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David N. Bouton

Mailing Address 1620 Pegfair Estates Drive

City Pasadena State CA Zip Code 91103-1934

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

Name of Employer Davalan Sales Occupation Chief Executive Of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00392
 Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Harry E. Bovay, Jr.

Mailing Address 3355 W. Alabama Street Suite 1140

City Houston State TX Zip Code 77098-1863

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 18 / 2009
Transaction ID: 2009M04L11ai00393
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Joe Bowden

Mailing Address 2119 Park Willow Lane Apartment D.

City Arlington State TX Zip Code 76011-3267

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

Name of Employer Bell Helicopter Occupation Tool Design Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai00394
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

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

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

FOR LINE NUMBER: PAGE 138 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stanley Bowden, II

Mailing Address 21 Chauncy Street
Apartment 38

City State Zip Code
Cambridge MA 02138-2454

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

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

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

Transaction ID: 2009M04L11ai00395

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Wayne Bower

Mailing Address 1608 Sunset Drive

City State Zip Code
Twin Lakes WI 53181-9732

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai00396

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Wayne Bower

Mailing Address 1608 Sunset Drive

City State Zip Code
Twin Lakes WI 53181-9732

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00397

Amount of Each Receipt this Period
200.00

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: (check only one)	PAGE 139 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. James W. Bowers		Date of Receipt
	Mailing Address P.O. Box 1271		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 05 / 2009
	City	State	Zip Code
	Gainesville	GA	30503-1271
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00398
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 206.00

B.	Full Name (Last, First, Middle Initial) Mr. George Bowman		Date of Receipt
	Mailing Address 1200 Ridgeline Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 17 / 2009
	City	State	Zip Code
	Boyne City	MI	49712-8729
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00399
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) Mrs. Caroline E. Boyd		Date of Receipt
	Mailing Address 4424 Carolina Highway		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 19 / 2009
	City	State	Zip Code
	Denmark	SC	29042-1666
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00400
Name of Employer The Caroline Collection Fine Antiques		Occupation Antique Dealer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 756.00
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 140 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Dan Boyd

Mailing Address 1400 West Third Ave.

City State Zip Code
Denver CO 80223-1416

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

Name of Employer Boyd Investment Company Occupation Business

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

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai00401

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Ronald Boyd

Mailing Address 324 S.W. 13Th Place

City State Zip Code
Boca Raton FL 33432-7173

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 0 9

Transaction ID: 2009M04L11ai00402

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Sally E Boyd

Mailing Address 1720 SE 16th Av
Bldg 200

City State Zip Code
Ocala FL 34471-4620

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

Name of Employer Ret. Occupation Ret.

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

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: 2009M04L11ai00403

Amount of Each Receipt this Period
250.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 141 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Scott Boyd

Mailing Address 6420 Cherry Hill Parkway

City State Zip Code
Fort Wayne IN 46835-9637

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

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00404

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Susan P. Boyd

Mailing Address 30 Beach Walker Road

City State Zip Code
Fernandina Beach FL 32034-6600

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00405

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. T. J. Boyd

Mailing Address P.O. Box 11351

City State Zip Code
Midland TX 79702-8351

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00406

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Ms. T. J. Boyd
 Mailing Address P.O. Box 11351
 City Midland State TX Zip Code 79702-8351
 Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai00407
 Amount of Each Receipt this Period: 250.00
 FEC ID number of contributing federal political committee: **C**
 Name of Employer Self-Employed Occupation Self-Employed
 Receipt For: Primary General Other (specify) Aggregate Year-to-Date: 500.00

B. Full Name (Last, First, Middle Initial)
 Mr. Tom Boyd
 Mailing Address 510 Strachan Avenue
 City Savannah State GA Zip Code 31406-8418
 Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai00408
 Amount of Each Receipt this Period: 150.00
 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: 300.00

C. Full Name (Last, First, Middle Initial)
 Mr. Tom Boyd
 Mailing Address 510 Strachan Avenue
 City Savannah State GA Zip Code 31406-8418
 Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai00409
 Amount of Each Receipt this Period: 150.00
 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: 300.00

SUBTOTAL of Receipts This Page (optional) **550.00**
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 143 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Alice C. Boyd-Gano

Mailing Address 5308 Pine Forest Road

City State Zip Code
Houston TX 77056-1315

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00410

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Gerald E Boyer

Mailing Address 26615 W 103rd Ter

City State Zip Code
Olathe KS 66061-7441

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00411

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
Mr. Gerald E Boyer

Mailing Address 26615 W 103rd Ter

City State Zip Code
Olathe KS 66061-7441

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00412

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **710.00**

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 144 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Michael Bozic

Mailing Address 1 Trimont Lane 1000-A

City State Zip Code
Pittsburgh PA 15211-1231

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai00413

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. John S. Bozic

Mailing Address 12 Annabelle Lane

City State Zip Code
Florham Park NJ 07932-2719

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

Name of Employer Occupation
Mitchell Supreme Inc. CEO

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00414

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Cassandra Brabham

Mailing Address 4 Dunleith Court

City State Zip Code
Irmo SC 29063-8042

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

Name of Employer Occupation
Noel Taylor Agency Insurance Sales

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai00415

Amount of Each Receipt this Period
300.00

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 145 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert M. Bradford

Mailing Address 3517 Briarwood Blvd.

City Billings State MT Zip Code 59101-9406

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

Name of Employer Carpenter Creek, L.L.C. Occupation Coal Mine Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai00416
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Gregory M. Bradley

Mailing Address 55 Jordan Road

City Indianapolis State IN Zip Code 46217-4001

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai00417
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Gregory M. Bradley

Mailing Address 55 Jordan Road

City Indianapolis State IN Zip Code 46217-4001

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai00418
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

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

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

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

FOR LINE NUMBER: PAGE 146 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dennis A Brady

Mailing Address 1455 Ocean Drive
#1607

City State Zip Code
Miami Beach FL 33139

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

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai00419
Amount of Each Receipt this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard T. Brady

Mailing Address 112 E. Pecan Street
Suite 1800

City State Zip Code
San Antonio TX 78205-1521

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

Name of Employer Cox, Smith & Matthews, Inc. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai00420
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. James D. Braga

Mailing Address 22535 220Th Street

City State Zip Code
Eldora IA 50627-8313

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai00421
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 2400.00

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 147 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Edward O. Bramman

Mailing Address 7408 Granbury Circle

City State Zip Code
Saint Louis MO 63123-2009

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00422

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Ms. Ann Brandau

Mailing Address 4033 Mary Drive

City State Zip Code
Onalaska WI 54650-8427

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 515.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00423

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Mr. Allan Brandt

Mailing Address 2510 Jarratt Avenue

City State Zip Code
Austin TX 78703-2433

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00424

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **525.00**

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 148 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Allan Brandt

Mailing Address 2510 Jarratt Avenue

City State Zip Code
Austin TX 78703-2433

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 5 / 2 0 0 9

Transaction ID: 2009M04L11ai00425

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Glenn S. Brant

Mailing Address P.O. Box 3396

City State Zip Code
Midland TX 79702-3396

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00426

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Fred Braselton

Mailing Address 6910 Sir Palleas

City State Zip Code
Corpus Christi TX 78413-5303

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

Name of Employer Braselton Homés Occupation Homebuilder

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai00427

Amount of Each Receipt this Period
205.00

SUBTOTAL of Receipts This Page (optional) ► **955.00**

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 149 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Sanford P. Brass		Date of Receipt	
	Mailing Address 3000 Ella Lee Ln		M M / D D / Y Y Y Y 03 / 31 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai00428
	Houston	TX	77019-5910	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Gulf Coast Asphalt		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00		

B.	Full Name (Last, First, Middle Initial) Ms. Jane Braswell		Date of Receipt	
	Mailing Address 712 Squaw Creek Road		M M / D D / Y Y Y Y 03 / 03 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai00429
	Willow Park	TX	76087-8252	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		200.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

C.	Full Name (Last, First, Middle Initial) Mr. Karl Brauer		Date of Receipt	
	Mailing Address 1719 Hidden Villas Dr.		M M / D D / Y Y Y Y 03 / 09 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai00430
	Kingwood	TX	77339-3333	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Kbr		Occupation Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	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 150 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George Braun

Mailing Address 5427 Caruth Blvd.

City State Zip Code
Dallas TX 75209-3527

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00431

Amount of Each Receipt this Period
270.00

B. Full Name (Last, First, Middle Initial)
Col. Gustav J. Braun, Jr.

Mailing Address 3104 Little Creek Lane

City State Zip Code
Alexandria VA 22309-2126

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

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

Transaction ID: 2009M04L11ai00432

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Col. Gustav J. Braun, Jr.

Mailing Address 3104 Little Creek Lane

City State Zip Code
Alexandria VA 22309-2126

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00433

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **470.00**

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 151 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Baxter L. Breaux

Mailing Address 4100 Springbrook Drive

City Odessa State TX Zip Code 79762-8028

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai00434
 Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Mr. Dennis Breck

Mailing Address 1655 Valley Drive

City Venice State FL Zip Code 34292-4321

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai00435
 Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mrs. Mary Bredel

Mailing Address R. R. 4 Box 126

City Okarche State OK Zip Code 73762-9420

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai00436
 Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ► 750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 152 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Nancy L. Breen - Mc Craley

Mailing Address 6195 Storyteller Ct.

City State Zip Code
Reno NV 89511-4352

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

Name of Employer Occupation
St. Nicholas School Teacher's Aide

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00437

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)

Dr. Beamer Breiling

Mailing Address 3233 Parkview Court S.E.

City State Zip Code
Cedar Rapids IA 52403-1913

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

Name of Employer Occupation
Self-Employed Self-Employed

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00438

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)

Mr. Richard F. Brenner

Mailing Address 612 Ardrey Circle

City State Zip Code
Davidson NC 28036-7018

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00439

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

875.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 153 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ann and Kevin Brewer

Mailing Address 115 Earl Street

City

Seaford

State

VA

Zip Code

23696-2312

FEC ID number of contributing federal political committee.

C

Name of Employer
lcg

Occupation
Cfo

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00440

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

Ms. Maxine Brian

Mailing Address 92 Steeple Chase Drive

City

Media

State

PA

Zip Code

19063-1975

FEC ID number of contributing federal political committee.

C

Name of Employer
Requested

Occupation
Requested

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00441

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)

Dr. P. L. Thibaut Brian

Mailing Address 1183 Edgewater Circle

City

Bradenton

State

FL

Zip Code

34209-9745

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00442

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

875.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 154 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Neil I. Brickel

Mailing Address 867 Minarca Drive

City State Zip Code
Des Peres MO 63131-2029

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

Name of Employer Self-Employed Occupation Self-Employed

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai00443

Amount of Each Receipt this Period
225.00

B.

Full Name (Last, First, Middle Initial)
Mr. Shane P. Brickley

Mailing Address 10326 Barker Road

City State Zip Code
Oak Hills CA 92344-0253

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00444

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Donald E Bridges

Mailing Address 154 Paul Dive

City State Zip Code
Brownsboro AL 35741

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

Name of Employer Itt/Cas Occupation Test Engineer

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai00445

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 155 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Tucker Bridwell

Mailing Address P.O. Box 1616

City Abilene State TX Zip Code 79604-1616

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

Name of Employer Mansfield Investment Corp. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai00446

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Philip Briggs

Mailing Address 36896 N. 104Th Place

City Scottsdale State AZ Zip Code 85262-4063

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 26 / 2009

Transaction ID: 2009M04L11ai00447

Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Ms. Rosemary Briggs

Mailing Address 4711 Watauga Road

City Dallas State TX Zip Code 75209-1923

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai00448

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► **2200.00**

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 156 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Natalie Bright

Mailing Address 1415 23Rd St.
Sunlight Exploration Inc

City Canyon State TX Zip Code 79015-5323

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

Name of Employer Sunlight Exploration, Inc Occupation Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai00449
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Norman Brinker

Mailing Address 10235 Strait Lane

City Dallas State TX Zip Code 75229-6533

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai00450
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Karyn Bristow

Mailing Address 5 Blackmer Road

City Englewood State CO Zip Code 80113-6109

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai00451
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 1600.00

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 157 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Edgar R. Britt

Mailing Address 200 The Glebe Blvd.
Apartment 4012

City Daleville State VA Zip Code 24083-3728

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai00452
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. William E. Britt

Mailing Address 188 D. Edgewater Park

City Bronx State NY Zip Code 10465

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai00453
Amount of Each Receipt this Period 55.00

C. Full Name (Last, First, Middle Initial)
Mr. Peter Broadbent, Jr.

Mailing Address 4804 Cary Street Road

City Richmond State VA Zip Code 23226-1618

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

Name of Employer Christian & Barton, Llp Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai00454
Amount of Each Receipt this Period 330.00

SUBTOTAL of Receipts This Page (optional) ▶ 585.00

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 158 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert Brockie		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address 7529 Maplecrest Drive		Transaction ID: 2009M04L11ai00455		
	City Dallas	State TX	Zip Code 75254-2814	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested	Occupation Requested	Aggregate Year-to-Date 1000.00		

B.	Full Name (Last, First, Middle Initial) Ms. Gail J. Brockman		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 8440 Frederick Pike		Transaction ID: 2009M04L11ai00456		
	City Dayton	State OH	Zip Code 45414-1231	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested	Occupation Requested	Aggregate Year-to-Date 1000.00		

C.	Full Name (Last, First, Middle Initial) Mr. Peter C. Brockway		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address 443 Royal Palm Way		Transaction ID: 2009M04L11ai00457		
	City Boca Raton	State FL	Zip Code 33432-7945	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Brockway Moran and Partners, Inc.	Occupation Private Equity	Aggregate Year-to-Date 5000.00		

SUBTOTAL of Receipts This Page (optional)	7000.00
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 159 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Vittorio Brod		Date of Receipt MM / DD / YYYY 03 / 04 / 2009
Mailing Address 1805 Crystal Drive Apartment 213		Transaction ID: 2009M04L11ai00458
City Arlington	State VA	Zip Code 22202-4402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Mrs. Janet E. Bromley		Date of Receipt MM / DD / YYYY 03 / 05 / 2009
Mailing Address 2124 Wiltshire Blvd.		Transaction ID: 2009M04L11ai00459
City Huntington	State WV	Zip Code 25701-5345
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Mr. John L. Bronson		Date of Receipt MM / DD / YYYY 03 / 23 / 2009
Mailing Address P.O. Box 461		Transaction ID: 2009M04L11ai00460
City Krebs	State OK	Zip Code 74554-0461
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

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 160 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Erik Bronstein

Mailing Address 318 Rosemary Lane

City Narberth State PA Zip Code 19072-1120

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai00461
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Burton W. Brooks

Mailing Address 1443 Badham Drive

City Birmingham State AL Zip Code 35216-2910

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai00462
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Burton W. Brooks

Mailing Address 1443 Badham Drive

City Birmingham State AL Zip Code 35216-2910

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai00463
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 161 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Dale Brooks

Mailing Address 79795 Tangelo

City State Zip Code
La Quinta CA 92253-4581

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00464

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)

Mr. David W. Brooks

Mailing Address P. O. Box 3668

City State Zip Code
Fort Myers FL 33918-3668

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

Name of Employer Occupation
Self-Employed Self-Employed

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00465

Amount of Each Receipt this Period
110.00

C.

Full Name (Last, First, Middle Initial)

Mr. David W. Brooks

Mailing Address P. O. Box 3668

City State Zip Code
Fort Myers FL 33918-3668

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

Name of Employer Occupation
Self-Employed Self-Employed

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00466

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ▶

420.00

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 162 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. & Mrs. John M. Brooks

Mailing Address 136 Bayou Road

City Greenville State MS Zip Code 38701-7725

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai00467

Amount of Each Receipt this Period
450.00

B. Full Name (Last, First, Middle Initial)
Mrs. Mary Kay Brooks

Mailing Address P.O. Box 9

City Sun Prairie State WI Zip Code 53590-0009

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai00468

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. Paul Broome

Mailing Address 3094 Carriage Hills Drive

City Boulder State CO Zip Code 80302-3411

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai00469

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1950.00

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 163 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Andrew M. Brown

Mailing Address P.O.Ox 648

City State Zip Code
Gadsden AL 35902

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

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

Transaction ID: 2009M04L11ai00470

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Ms. Anne A. Brown

Mailing Address 212 Knollwood Drive

City State Zip Code
Oxford OH 45056-8784

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00471

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
Mrs. Caroline Brown

Mailing Address 132 Pamellia Dr

City State Zip Code
Bellaire TX 77401-3712

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

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

Transaction ID: 2009M04L11ai00472

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **910.00**

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 164 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Catherine M. Brown

Mailing Address 3937 Elsa Street

City State Zip Code
Lakewood CA 90712-3872

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

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

Transaction ID: 2009M04L11ai00473

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Jean Brown

Mailing Address P. O. Box 738

City State Zip Code
Ignacio CO 81137-0738

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00474

Amount of Each Receipt this Period
115.00

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey S. Brown

Mailing Address 2294 North 2350 East

City State Zip Code
Layton UT 84040-8054

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 850.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00475

Amount of Each Receipt this Period
750.00

SUBTOTAL of Receipts This Page (optional) ► **1365.00**

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 165 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Jimmy L. Brown

Mailing Address 8002 Cameron Road

City State Zip Code
Richmond VA 23229-8402

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai00476

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Joel Everett Brown

Mailing Address 125 Cuello Court
Unit 201

City State Zip Code
Ponte Vedra FL 32082-4079

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00477

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. John F. Brown

Mailing Address 1024 Harvard Road

City State Zip Code
Grosse Pointe MI 48230-1454

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

Name of Employer Occupation
South Field Radiology Associates P.C. Physician

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 660.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai00478

Amount of Each Receipt this Period
660.00

SUBTOTAL of Receipts This Page (optional)

1060.00

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 166 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Larry L. Brown

Mailing Address 517 Wyss Ridge Drive

City	State	Zip Code
Fort Wayne	IN	46819-2267

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

Name of Employer Self-Employed	Occupation Self-Employed
-----------------------------------	-----------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	--

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai00479

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Larry L. Brown

Mailing Address 517 Wyss Ridge Drive

City	State	Zip Code
Fort Wayne	IN	46819-2267

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

Name of Employer Self-Employed	Occupation Self-Employed
-----------------------------------	-----------------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00
---	--

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai00480

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Lawrence L. Brown

Mailing Address 335 Alanbrook Avenue

City	State	Zip Code
Sherwood	AR	72120-4832

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

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

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00
---	--

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai00481

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 167 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Lionel G Brown

Mailing Address 19 Shepherd Hill Rd

City State Zip Code
Newtown CT 06470

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

Name of Employer Occupation
Hand Center Of West. Ct. Hand Surgeon

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai00482

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Miss Louise C. Brown

Mailing Address 465 Broyles Lane

City State Zip Code
Bristol TN 37620-0715

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai00483

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Maria Da Gloria G. Brown

Mailing Address 20014 103Rd Court N.E.

City State Zip Code
Bothell WA 98011-2457

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00484

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

1350.00

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 168 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Otis Brown

Mailing Address 2903 Sugarberry Lane

City State Zip Code
Midlothian VA 23113-1418

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	0	9

Transaction ID: 2009M04L11ai00485

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Owen Brown

Mailing Address 695 River Knoll Dr. Se

City State Zip Code
Marietta GA 30067-4748

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

Name of Employer Occupation
Retail Planning Corporati- on Real Estate

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00486

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard G. Brownd

Mailing Address 288 Koons Road

City State Zip Code
Mossyrock WA 98564-9716

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

Name of Employer Occupation
Self-Employed Self-Employed

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00487

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶

1000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 169 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Carroll A. Browne

Mailing Address 1005 S. Garfield Drive

City State Zip Code
Sioux Falls SD 57105-0213

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

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

Transaction ID: 2009M04L11ai00488

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Carroll A. Browne

Mailing Address 1005 S. Garfield Drive

City State Zip Code
Sioux Falls SD 57105-0213

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00489

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert W. Browne

Mailing Address 2912 Riviera Blvd.

City State Zip Code
Malaga WA 98828-9733

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

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
270.00

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

Transaction ID: 2009M04L11ai00490

Amount of Each Receipt this Period
25.00

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

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 170 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David S. Browning

Mailing Address 8437 Tuttle Avenue
Unit 310

City State Zip Code
Sarasota FL 34243-2868

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

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00491

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. David S. Browning

Mailing Address 8437 Tuttle Avenue
Unit 310

City State Zip Code
Sarasota FL 34243-2868

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

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00492

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Ray Brownlie

Mailing Address 10 Cherrymoor Drive

City State Zip Code
Englewood CO 80113-6002

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00493

Amount of Each Receipt this Period
300.00

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 171 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert W. Broyles

Mailing Address P.O. Box 100744

City State Zip Code
Fort Worth TX 76185-0744

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: 2009M04L11ai00494

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Roger G. Bruce

Mailing Address 5225 S. Prince Street
Apartment 715

City State Zip Code
Littleton CO 80123-7776

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00495

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mark & Jamie Brunette

Mailing Address 19518 Country Village Drive

City State Zip Code
Spring TX 77388-3083

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

Name of Employer Northside Plumbing Supply Occupation I.M.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00496

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 172 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles H. Brunie

Mailing Address 21 Elm Rock Road

City State Zip Code
Bronxville NY 10708-4202

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00497

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Don Bryant

Mailing Address 271 County Road 40

City State Zip Code
Muleshoe TX 79347-5233

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

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1080.00

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

Transaction ID: 2009M04L11ai00498

Amount of Each Receipt this Period
360.00

C. Full Name (Last, First, Middle Initial)
Dr. Neil Bryant

Mailing Address P.O. Box 104

City State Zip Code
Shaw Island WA 98286-3229

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00499

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1110.00**

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 173 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Weston Bubar

Mailing Address 293 Great Moose Drive

City State Zip Code
Hartland ME 04943-3002

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

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt

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

Transaction ID: 2009M04L11ai00500

Amount of Each Receipt this Period
205.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Barbara H. Buchanan

Mailing Address 628 Trailwood Ln. S.W.

City State Zip Code
Marietta GA 30064-4627

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00501

Amount of Each Receipt this Period
225.00

C.

Full Name (Last, First, Middle Initial)
Mr. David R Buchanan

Mailing Address 6301 E. Huntress Drive

City State Zip Code
Paradise Valley AZ 85253-8001

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00502

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)

1430.00

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 174 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Roger W. Buchanan

Mailing Address 1157 Gurley Dairy Road N.W.

City State Zip Code
Pikeville NC 27863-8732

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai00503

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Suzette Buchanan

Mailing Address 1507 Ridgemont Court

City State Zip Code
Fullerton CA 92831-1223

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 410.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai00504

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Suzette Buchanan

Mailing Address 1507 Ridgemont Court

City State Zip Code
Fullerton CA 92831-1223

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

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 410.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai00505

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 175 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Wilton Ray Buchanan

Mailing Address 1595 Elkhart Circle

City State Zip Code
Gastonia NC 28054-7705

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00506

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Alex Bucher

Mailing Address 2103 Golden Pond Drive

City State Zip Code
Kingwood TX 77345

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

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

Transaction ID: 2009M04L11ai00507

Amount of Each Receipt this Period
375.00

C. Full Name (Last, First, Middle Initial)
Mr. August R. Buchhalter

Mailing Address 4910A Meridian Way
Apartment 7

City State Zip Code
Frederick MD 21703-6886

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

Name of Employer Requested Occupation Requested
Pinney Associates Scientist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

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

Transaction ID: 2009M04L11ai00508

Amount of Each Receipt this Period
125.00

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 176 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Sara L. Buck

Mailing Address 4535 Province Line Road

City State Zip Code
Princeton NJ 08540-2211

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

Name of Employer Requested Occupation
Volunteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00509

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas Buck

Mailing Address 510 E. 96Th Street Suite 500

City State Zip Code
Nora IN 46240-9562

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

Name of Employer Merrill Lynch Occupation
Financial Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

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

Transaction ID: 2009M04L11ai00510

Amount of Each Receipt this Period
380.00

C. Full Name (Last, First, Middle Initial)
Mrs. Marlene S. Buckley

Mailing Address 4100 Oak Forest Drive

City State Zip Code
Des Moines IA 50312-4633

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

Name of Employer Homemaker Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00511

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1130.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 177 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Steven Buckley

Mailing Address 6007 Macon Court S.E.

City State Zip Code
Huntsville AL 35802-1931

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

Name of Employer Occupation
The Orthopedic Center Physician

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

Date of Receipt

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

Transaction ID: 2009M04L11ai00512

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Dr. Steven Buckley

Mailing Address 6007 Macon Court S.E.

City State Zip Code
Huntsville AL 35802-1931

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

Name of Employer Occupation
The Orthopedic Center Physician

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai00513

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Walter P. Buckthal

Mailing Address 2028 S. Austen
Apartment 1102

City State Zip Code
Amarillo TX 79109-1961

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

Name of Employer Occupation
Self-Employed Self-Employed

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai00514

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)

2200.00

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 178 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thaddeus J. Buda, Jr.
Mailing Address 2417 Cheltingham Blvd.
City State Zip Code
Lansing MI 48917-5158
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt MM / DD / YYYY
03 / 30 / 2009
Transaction ID: 2009M04L11ai00515
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Timothy J. Buerkle
Mailing Address P.O. Box 2233
City State Zip Code
Sun City AZ 85372-2233
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt MM / DD / YYYY
03 / 05 / 2009
Transaction ID: 2009M04L11ai00516
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Alfred J. Buescher
Mailing Address 4901 Lakeside Avenue East
City State Zip Code
Cleveland OH 44114-3931
FEC ID number of contributing federal political committee. **C**
Name of Employer Interstate Diesel Service, Inc. Occupation Business Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt MM / DD / YYYY
03 / 19 / 2009
Transaction ID: 2009M04L11ai00517
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 179 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Henry M. Buhl

Mailing Address 114 Greene Street

City State Zip Code
New York NY 10012-3829

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

Name of Employer Associates Of Community Occupation Social Worker

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

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 18 / 2009

Transaction ID: 2009M04L11ai00518

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Karen L Buhl

Mailing Address 211 Neltom Drive

City State Zip Code
Pierre SD 57501-4806

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

Name of Employer Self-Employed Occupation Self-Employed

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

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00519

Amount of Each Receipt this Period
750.00

C.

Full Name (Last, First, Middle Initial)
Mr. Frank C. Buhlman

Mailing Address 4600 Alpes Way

City State Zip Code
Reno NV 89511-5086

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai00520

Amount of Each Receipt this Period
330.00

SUBTOTAL of Receipts This Page (optional)

1330.00

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 180 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Raymond Bukaty
Mailing Address 1 Corona
City Irvine State CA Zip Code 92603-5704
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai00521
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Ms. Charlotte E. Bunnell
Mailing Address 700 Black Lake Blvd. SW #131
City Olympia State WA Zip Code 98502-8631
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 490.00
Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai00522
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Dallas S. Bunton, Sr.
Mailing Address 5827 Rainbow Spring Drive
City Chattanooga State TN Zip Code 37416-1049
FEC ID number of contributing federal political committee. **C**
Name of Employer North American Credit Service Occupation Chief Executive Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai00523
Amount of Each Receipt this Period 500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 181 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. David M. Burke

Mailing Address 1004 Vassar Road

City State Zip Code
Alexandria VA 22314-4730

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 905.00

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

Transaction ID: 2009M04L11ai00524

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. David M. Burke

Mailing Address 1004 Vassar Road

City State Zip Code
Alexandria VA 22314-4730

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 905.00

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

Transaction ID: 2009M04L11ai00525

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. David M. Burke

Mailing Address 1004 Vassar Road

City State Zip Code
Alexandria VA 22314-4730

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 905.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00526

Amount of Each Receipt this Period
200.00

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 182 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kelly Burke

Mailing Address 803 Choctaw Lane

City State Zip Code
Shalimar FL 32579-2248

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

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

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

Transaction ID: 2009M04L11ai00527

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
R. J. Burke

Mailing Address 18433 Amistad Street

City State Zip Code
Fountain Valley CA 92708-6906

FEC ID number of contributing federal political committee. C

Name of Employer Tiempo Escrow II Occupation C. E. O.

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

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai00528

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
R. J. Burke

Mailing Address 18433 Amistad Street

City State Zip Code
Fountain Valley CA 92708-6906

FEC ID number of contributing federal political committee. C

Name of Employer Tiempo Escrow II Occupation C. E. O.

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

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai00529

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) 1250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Eugene Burkemper	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 24259 Lawson Hill Lane	Transaction ID: 2009M04L11ai00530
	City State Zip Code Brashear MO 63533-2522	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Self-Employed	
	Receipt For: Aggregate Year-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Terry M Burleson	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 525 N State Rt 25	Transaction ID: 2009M04L11ai00531
	City State Zip Code Dexter MO 63841-1380	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Chrisman Lp Gas President	
	Receipt For: Aggregate Year-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Dr. J. Bricker Burns	Date of Receipt MM / DD / YYYY 03 / 19 / 2009
	Mailing Address 1239 Winding Branch Circle	Transaction ID: 2009M04L11ai00532
	City State Zip Code Atlanta GA 30338-3935	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Requested Requested	
	Receipt For: Aggregate Year-to-Date <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00	

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 184 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. R. E. Burns

Mailing Address 3370 Clubview Terrace

City State Zip Code
Colorado Springs CO 80906-4419

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

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

Transaction ID: 2009M04L11ai00533

Amount of Each Receipt this Period
600.00

B.

Full Name (Last, First, Middle Initial)
Mr. William Burow

Mailing Address 107 Country Club Ct.

City State Zip Code
Danville IL 61832-1219

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

Name of Employer ON Insurance Occupation Insurance Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00534

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Marianne Burrell

Mailing Address 1100 S. Lennox Drive

City State Zip Code
Olathe KS 66062-2240

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

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
255.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00535

Amount of Each Receipt this Period
255.00

SUBTOTAL of Receipts This Page (optional) ► **955.00**

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 185 / 1945
(check only one)

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

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Donna J. Burrill

Mailing Address P. O. Box 143

City State Zip Code
Fort Collins CO 80522-0143

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

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00536

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. Oliver M. Burrows

Mailing Address 2400 Martingail Drive

City State Zip Code
Covina CA 91724-3810

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

Name of Employer Occupation
Foothill Family Practice Group Medical Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00537

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Raymond & Shirley M. Burt

Mailing Address P.O. Box 888

City State Zip Code
Ilwaco WA 98624-0888

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00538

Amount of Each Receipt this Period
101.00

SUBTOTAL of Receipts This Page (optional) ► 601.00

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 186 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Raymond & Shirley M. Burt

Mailing Address P.O. Box 888

City

Ilwaco

State

WA

Zip Code

98624-0888

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00539

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. David C Burton

Mailing Address P.O. Box 1347

City

Janesville

State

WI

Zip Code

53547-1347

FEC ID number of contributing federal political committee.

C

Name of Employer
Performance Micro Tool

Occupation
Business Owner

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai00540

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Ms. R. M. Burton

Mailing Address 6808 Legend Lane

City

Cheyenne

State

WY

Zip Code

82009-8388

FEC ID number of contributing federal political committee.

C

Name of Employer
Congressman Lummis

Occupation
Field Representative

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00541

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

1150.00

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 187 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. R. M. Burton		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address 6808 Legend Lane		Transaction ID: 2009M04L11ai00542		
	City Cheyenne	State WY	Zip Code 82009-8388	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Congressman Lummis	Occupation Field Representative			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Robert E. Burton		Date of Receipt MM / DD / YYYY 03 / 30 / 2009		
	Mailing Address 105 Post Oak Trail		Transaction ID: 2009M04L11ai00543		
	City Athens	State GA	Zip Code 30606-1300	Amount of Each Receipt this Period 5000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Burton & Burton	Occupation Gift Distributor & Importer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

C.	Full Name (Last, First, Middle Initial) Ms. Laura J. Busby		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 317 Carter Cove		Transaction ID: 2009M04L11ai00544		
	City Lake City	State AR	Zip Code 72437-9000	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	5150.00
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 188 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Mary Alice Busch

Mailing Address 1509 Cherokee Road

City State Zip Code
Florence SC 29501-4551

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

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00545

Amount of Each Receipt this Period
210.00

B. Full Name (Last, First, Middle Initial)
Stephen & Donna Busch

Mailing Address 2279 Arborcrest Road

City State Zip Code
Moscow ID 83843-9106

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

Name of Employer Busch Distributors, Inc. Occupation Ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00546

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Dr. Roger M. Busfield, Jr.

Mailing Address P.O. Box 2267

City State Zip Code
Georgetown TX 78627-2267

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: 2009M04L11ai00547

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **910.00**

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 189 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Roger M. Busfield, Jr.
Mailing Address P.O. Box 2267

City State Zip Code
Georgetown TX 78627-2267

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00548

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Miriam Bushnell
Mailing Address 11550 N.W. Highway 225 A.

City State Zip Code
Reddick FL 32686-4329

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

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

Transaction ID: 2009M04L11ai00549

Amount of Each Receipt this Period 370.00

C. Full Name (Last, First, Middle Initial)
Mr. William F. Butin
Mailing Address 312 Duck Lake Drive

City State Zip Code
Lakeway TX 78734-4505

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00550

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **720.00**

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 190 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. James G. Butler

Mailing Address 6010 Thoroughbred Ridge

City State Zip Code
College Station TX 77845-2324

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

Name of Employer I.I.C.A. Occupation Administration

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: 2009M04L11ai00551

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. John A. Butler

Mailing Address 211 Mays Drive

City State Zip Code
Bloomington IL 61701-2032

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

Name of Employer Chesser Financial Occupation Registered Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00552

Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Ms. Nona A. Butterworth

Mailing Address 182 Irving Place

City State Zip Code
Basking Ridge NJ 07920-3083

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

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

Transaction ID: 2009M04L11ai00553

Amount of Each Receipt this Period: 150.00

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 191 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Manny D. Buzzell

Mailing Address 6105 Johnson Chapel Road

City State Zip Code
Brentwood TN 37027-5720

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: 2009M04L11ai00554

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Walter Byers

Mailing Address 25707 Aiken Switch Road

City State Zip Code
Emmett KS 66422-9719

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

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00555

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael L Byrd

Mailing Address 25587 Magnolia Rd

City State Zip Code
Hockley TX 77447-5203

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

Name of Employer Bp Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00556

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 2550.00

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 192 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Milissa Byrd

Mailing Address 6250 Riverside Dr. NW

City State Zip Code
Atlanta GA 30328-3624

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

Name of Employer Occupation
Pro Seal Plus Vice President

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai00557

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Sylvia & Robert Byrd

Mailing Address 12975 Highway 17

City State Zip Code
Montevallo AL 35115-8730

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

Name of Employer Occupation
Green Valley Farms, Inc. Nurseryman

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai00558

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. James P. Byrnes

Mailing Address 1940 Cole Road

City State Zip Code
Nunda NY 14517-9665

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai00559

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

600.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 193 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. James Byrns

Mailing Address 3900 Valley Oaks Drive

City State Zip Code
Clinton IA 52732

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

Name of Employer Occupation
Custom Park, Inc. C.E.O.

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai00560

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Ms. Jann Bytheway

Mailing Address 9135 Golden Gate Avenue

City State Zip Code
Orangevale CA 95662-2219

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai00561

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
Mr. John Cabanas

Mailing Address 932 Ponce De Leon Blvd.
#B

City State Zip Code
Coral Gables FL 33134-3010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai00562

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) ▶

4500.00

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 194 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Damon W. Cable

Mailing Address 1025 N. Nielson Street

City State Zip Code
Gilbert AZ 85234-3346

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ev Peds Pediatric Nurse Practitioner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai00563

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Dr. Orlando G. Cabrera

Mailing Address 1865 Brickell Avenue
Apartment A2003

City State Zip Code
Miami FL 33129-1652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai00564

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Dr. Orlando G. Cabrera

Mailing Address 1865 Brickell Avenue
Apartment A2003

City State Zip Code
Miami FL 33129-1652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00565

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► 220.00

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 195 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Ellen B. Cadick

Mailing Address 2555 S. Atlantic Avenue
Apartment 202

City State Zip Code
Daytona Beach FL 32118-5531

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00566

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. David G. Cadiz

Mailing Address 1003 Bishop Street
Suite 360

City State Zip Code
Honolulu HI 96813-6408

FEC ID number of contributing federal political committee. **C**

Name of Employer C.I.S. Occupation Insurance Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00567

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. John J. Cady

Mailing Address 223 E. Pine Meadows Court

City State Zip Code
Andover KS 67002-8840

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00568

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 196 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Bill Cagle		Date of Receipt
	Mailing Address 5910 S. University Blvd. #C18432		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Greenwood Village	CO	80121
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00569
Name of Employer Independent Production Co Inc		Occupation Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2500.00"/>
		<input type="text" value="2500.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. Kevin J. Cain		Date of Receipt
	Mailing Address 2329 Eldger Drive		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Plano	TX	75025-2146
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00570
Name of Employer Hunt Construction Group, Inc		Occupation Construction Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="300.00"/>	

C.	Full Name (Last, First, Middle Initial) Miss Marilyn L. Cain		Date of Receipt
	Mailing Address 4044 Via Ingresio		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Cypress	CA	90630-3434
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00571
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="300.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2700.00"/>
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 197 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kevin E. Calderwood
 Mailing Address 1236 Tottenham Court
 City Reston State VA Zip Code 20194-1415
 Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00572
 Amount of Each Receipt this Period 2000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Amp Capital Partners Occupation Investor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 2000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Sydnee Calderwood
 Mailing Address 1236 Tottenham Court
 City Reston State VA Zip Code 20194-1415
 Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00573
 Amount of Each Receipt this Period 2300.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 2300.00

C. Full Name (Last, First, Middle Initial)
Mrs. & Mr. Barbara & Myron Calhoun
 Mailing Address 1152 Avalon Road
 City Star City State AR Zip Code 71667-8980
 Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai00574
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer BKD LLP Occupation CPA
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 255.00

SUBTOTAL of Receipts This Page (optional) ► 4400.00
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 198 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Douglas Callahan

Mailing Address 11011 N. Farm Road 225

City State Zip Code
Fair Grove MO 65648-8532

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00575

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. John R. Camp, Jr.

Mailing Address 2532 S.W. 50Th Blvd.

City State Zip Code
Gainesville FL 32608-3977

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00576

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. John R. Camp, Jr.

Mailing Address 2532 S.W. 50Th Blvd.

City State Zip Code
Gainesville FL 32608-3977

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00577

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 199 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John R. Camp, Jr.
Mailing Address 2532 S.W. 50Th Blvd.
City Gainesville State FL Zip Code 32608-3977
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00578
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Barbara Campbell
Mailing Address 379 Three Fearhers
City Bozeman State MT Zip Code 59718-7748
FEC ID number of contributing federal political committee. **C**
Name of Employer Double-Tree, Inc. Occupation Business Management
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00579
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard Campbell
Mailing Address 13487 Turtle Pond Lane
City Palos Heights State IL Zip Code 60463-2700
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai00580
Amount of Each Receipt this Period 165.00

SUBTOTAL of Receipts This Page (optional) ► 365.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 200 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Reno G. Caneva

Mailing Address 225 E. 10Th Street

City State Zip Code
Lockport IL 60441-3411

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00581

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Lewis C. Canfield

Mailing Address 461 E. 20Th Street

City State Zip Code
Costa Mesa CA 92627-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer Newport Lease/Rental Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00582

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
Capt. Davis S. Cangalosi, U.S.N. (Re

Mailing Address 1872 B. Spring Hill Road

City State Zip Code
Staunton VA 24401-9011

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00583

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 201 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Capt. Davis S. Cangalosi, U.S.N. (Re

Mailing Address 1872 B. Spring Hill Road

City State Zip Code
Staunton VA 24401-9011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai00584

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Dr. Bruce W. Cannon

Mailing Address 118 Forestview Drive

City State Zip Code
Beckley WV 25801-9572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sheridan Healthcare, Inc. Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai00585

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Ms. Hazel E. Cannon

Mailing Address 6140 Carriage House Way #6

City State Zip Code
Reno NV 89519-7341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai00586

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶

800.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Hazel E. Cannon

Mailing Address 6140 Carriage House Way #6

City State Zip Code
Reno NV 89519-7341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
800.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai00587

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. Salvatore J Cantarella

Mailing Address 103 East Orchid Road

City State Zip Code
Wildwood Crest NJ 08260

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Allied World Assurance Co- Insurance Underwriter
mpany

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai00588

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Dr. Joaquin Cantillo

Mailing Address 703 Worthington Mill Road

City State Zip Code
Richboro PA 18954-1971

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Trenton Anesthesiology As- Physician
sociates

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai00589

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

950.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 203 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Jean B. Capizzi

Mailing Address 5615 Old State Road

City State Zip Code
Angelica NY 14709-8718

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00590

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mrs. Jean B. Capizzi

Mailing Address 5615 Old State Road

City State Zip Code
Angelica NY 14709-8718

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00591

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jean B. Capizzi

Mailing Address 5615 Old State Road

City State Zip Code
Angelica NY 14709-8718

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00592

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **80.00**

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 204 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Michael J. Caponiti

Mailing Address 93 Evergreen Ave.

City Rye State NY Zip Code 10580-2052

FEC ID number of contributing federal political committee. **C**

Name of Employer Archimedes Capital Group Occupation Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai00593

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Ms. Norma Leone Cappelletti

Mailing Address P.O. Box 4749

City Pinehurst State NC Zip Code 28374-4749

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 749.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai00594

Amount of Each Receipt this Period 749.00

C. Full Name (Last, First, Middle Initial)
Ms. Joyce Caracci

Mailing Address 5018 Riverwood Circle

City Jackson State MS Zip Code 39211-4739

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 25 / 2009

Transaction ID: 2009M04L11ai00595

Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 1449.00

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 205 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James Caragher

Mailing Address 34 Cambridge Road

City State Zip Code
Lafayette NJ 07848-3010

FEC ID number of contributing federal political committee. **C**

Name of Employer Navigators Management Company Occupation Insurance

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai00596

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. William E. Carl

Mailing Address P.O. Box 698

City State Zip Code
Beeville TX 78104-0698

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai00597

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Mrs. William E. Carl

Mailing Address P.O. Box 698

City State Zip Code
Beeville TX 78104-0698

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00598

Amount of Each Receipt this Period
50.00

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 206 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles H. Carlan

Mailing Address 3420 Oakmont Drive

City State Zip Code
Pensacola FL 32503-6900

FEC ID number of contributing federal political committee. **C**

Name of Employer Hatch Mott Macdonald Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00599

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Ann Carley

Mailing Address 2900 Palos Verdes Drive N.

City State Zip Code
Rolling Hills CA 90274-4116

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00600

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Judy Carley

Mailing Address 4400 N. Irving Street

City State Zip Code
Kingman AZ 86409-2668

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00601

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 207 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Judy Carley		Date of Receipt	
	Mailing Address 4400 N. Irving Street		M M / D D / Y Y Y Y Y 03 / 17 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai00602
	Kingman	AZ	86409-2668	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

B.	Full Name (Last, First, Middle Initial) Mrs. Judy Carley		Date of Receipt	
	Mailing Address 4400 N. Irving Street		M M / D D / Y Y Y Y Y 03 / 17 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai00603
	Kingman	AZ	86409-2668	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

C.	Full Name (Last, First, Middle Initial) Roy Carls		Date of Receipt	
	Mailing Address 625 Kent Ave., Suite 102		M M / D D / Y Y Y Y Y 03 / 30 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai00604
	Cumberland	MD	21502	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Peak Performance Orthopedics		Occupation Orthopedic Surgeon		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

SUBTOTAL of Receipts This Page (optional)	▶	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 208 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Don Carlson		Date of Receipt
	Mailing Address 6200 S. Mc Clintock Drive Suite 105		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 03 / 2009
	City State Zip Code Tempe AZ 85283-3268		Transaction ID: 2009M04L11ai00605
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
	Name of Employer Occupation Self-Employed Self-Employed		<input type="text"/> 110.00
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 220.00

B.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Royce Carlson		Date of Receipt
	Mailing Address 518 Easton Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 25 / 2009
	City State Zip Code Geneva IL 60134-3032		Transaction ID: 2009M04L11ai00606
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
	Name of Employer Occupation R. D. Carlson Insurance Agency I. Owner		<input type="text"/> 1000.00
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 1000.00

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Donald M. Carlton		Date of Receipt
	Mailing Address 403 Weston Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 10 / 2009
	City State Zip Code Austin TX 78733-4215		Transaction ID: 2009M04L11ai00607
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
	Name of Employer Occupation Retired Retired		<input type="text"/> 300.00
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 300.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1410.00
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 209 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Adrian Carmack
Mailing Address 1611 Cape Hatteras Pl
City State Zip Code
Rockwall TX 75087-5138
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Artist
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai00608
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Kristopher D. Carney
Mailing Address 2 Plymouth Rd.
City State Zip Code
Summit NJ 07901-3232
FEC ID number of contributing federal political committee. **C**
Name of Employer Keswick Management Inc Occupation Director Of Investments
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai00609
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Ms. Anna Carozzi
Mailing Address 1955 Wynstone Circle N.E.
City State Zip Code
North Canton OH 44720-3368
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai00610
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 1600.00
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 210 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Anna Carozzi

Mailing Address 1955 Wynstone Circle N.E.

City North Canton State OH Zip Code 44720-3368

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai00611

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert R. Carpenter, III

Mailing Address P.O. Box 732

City Montchanin State DE Zip Code 19710-0732

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai00612

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Oliver T Carr

Mailing Address 1750 H Street NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C**

Name of Employer The Oliver T Carr Company Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 02 / 2009

Transaction ID: 2009M04L11ai00373

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) ► 5300.00

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 211 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David Carr

Mailing Address P.O. Box 574

City State Zip Code
Junction City KS 66441-0574

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00613

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Jeff Carr

Mailing Address 5826 Garth Circle Nw

City State Zip Code
Canton OH 44718-1373

FEC ID number of contributing federal political committee. **C**

Name of Employer Jeffrey Carr Construction Inc. Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00614

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Milton D. Carr

Mailing Address 402 Summer Drive

City State Zip Code
Mesquite TX 75149-2537

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai00615

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Ruth A. Carr	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 325 Cabin Grove Lane	Transaction ID: 2009M04L11ai00616
	City State Zip Code Saint Louis MO 63141-8171	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Carr Textile Corp Occupation Office Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. P. I. Carraway, Jr.	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 504 Bunker Drive	Transaction ID: 2009M04L11ai00617
	City State Zip Code Virginia Beach VA 23462-4508	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Mr. Ralph R. Carruthers	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 601 Glenway Drive	Transaction ID: 2009M04L11ai00618
	City State Zip Code Hamilton OH 45013-3578	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1520.00	

SUBTOTAL of Receipts This Page (optional)	270.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 213 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Thomas & Susan Carruthers

Mailing Address 400 Oak Drive

City State Zip Code
Glendale OH 45246-4716

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: 2009M04L11ai00619

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Francis W. Carson

Mailing Address 2309 Apparation Court

City State Zip Code
Saint George UT 84790-8001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai00620

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Daniel R. Carter

Mailing Address 5723 Garden Point Drive

City State Zip Code
Kingwood TX 77345-1753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai00621

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

850.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 214 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Vicki A. Carter

Mailing Address 1987 Woodlake Drive

City State Zip Code
Orange Park FL 32003-7227

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00622

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. W. L. Carter, Jr.

Mailing Address 261 S. Lake Pansy Drive

City State Zip Code
Winter Haven FL 33881-9547

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00623

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Janice G. Cartwright

Mailing Address P.O. Box 387

City State Zip Code
Pauma Valley CA 92061-0387

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00624

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Calvin R. Carver

Mailing Address 105 Stewart Road

City State Zip Code
Short Hills NJ 07078-1923

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai00625

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Royce J. Carville

Mailing Address 2122 North Avenue

City State Zip Code
Grand Junction CO 81501-6429

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00626

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Royce J. Carville

Mailing Address 2122 North Avenue

City State Zip Code
Grand Junction CO 81501-6429

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00627

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 800.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John B. Cary

Mailing Address 266 Raymond Drive

City Benicia State CA Zip Code 94510-2739

FEC ID number of contributing federal political committee. **C**

Name of Employer Art, Llc Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00628
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Ms. Margaret Casanova

Mailing Address 2525 Cal Young Road
Apartment 232

City Eugene State OR Zip Code 97401-6474

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai00629
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Royce B. Casey

Mailing Address 1412 Modeste Dr.

City League City State TX Zip Code 77573-3032

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai00630
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 217 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Samuel B. Casey

Mailing Address 3138 Barkley Drive

City State Zip Code
Fairfax VA 22031-2721

FEC ID number of contributing federal political committee. **C**

Name of Employer Christian Legal Society Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: 2009M04L11ai00631
Amount of Each Receipt this Period: 275.00

B. Full Name (Last, First, Middle Initial)
Mr. Omar A. Cassola

Mailing Address 16666 N.W. 19th Avenue

City State Zip Code
North Miami Beach FL 33162

FEC ID number of contributing federal political committee. **C**

Name of Employer Giosol Corporation Occupation Engineer/President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai00632
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Ricardo Castaneda

Mailing Address 3202 Queensbury Way W.

City State Zip Code
Colleyville TX 76034-4740

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 04 / 2009
Transaction ID: 2009M04L11ai00633
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ► **1075.00**

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 218 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frank Catapano

Mailing Address 3 Hickory Pond Lane

City State Zip Code
Stratham NH 03885-2496

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00634

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Mary F. Cater

Mailing Address P.O. Box 194

City State Zip Code
Central SC 29630-0194

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai00635

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary F. Cater

Mailing Address P.O. Box 194

City State Zip Code
Central SC 29630-0194

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00636

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► 195.00

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 219 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Mary F. Cater
Mailing Address P.O. Box 194
City State Zip Code
Central SC 29630-0194
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00
Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai00637
Amount of Each Receipt this Period 35.00

B. Full Name (Last, First, Middle Initial)
Ms. Rebecca A. Cates
Mailing Address P.O. Box 632
City State Zip Code
Cle Elum WA 98922-0632
FEC ID number of contributing federal political committee. **C**
Name of Employer Expeditors International Of Wa Occupation Accountant
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai00638
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Richard J Cavallaro
Mailing Address 100 Dascomb Road
City State Zip Code
Andover MA 01810-5852
FEC ID number of contributing federal political committee. **C**
Name of Employer Empirix Occupation Engineer
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00639
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 585.00
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 220 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Richard J Cavallaro
Mailing Address 100 Dascomb Road
City Andover State MA Zip Code 01810-5852
FEC ID number of contributing federal political committee. **C**
Name of Employer Empirix Occupation Engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00640
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Wylie D. Cavin, III
Mailing Address 6409 Landmark Drive
City Alexandria State LA Zip Code 71301-2344
FEC ID number of contributing federal political committee. **C**
Name of Employer Mitchell Law Firm Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai00641
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Harry W. Cawthon
Mailing Address 59 Lakeshore Drive
City Shalimar State FL Zip Code 32579-2209
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai00642
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: PAGE 221 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Harry W. Cawthon

Mailing Address 59 Lakeshore Drive

City State Zip Code
Shalimar FL 32579-2209

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai00643

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Agatha M. Cayia

Mailing Address 3895 S.E. 20Th Street

City State Zip Code
Ocala FL 34471-5665

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00644

Amount of Each Receipt this Period
205.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark T. Caylor

Mailing Address 12441 Atherton Road

City State Zip Code
Anchorage AK 99516-2912

FEC ID number of contributing federal political committee. **C**

Name of Employer Alaska Native Medical Center Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00645

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **555.00**

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 222 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Martha E. Cepero

Mailing Address 1801 S.W. 99Th Place

City State Zip Code
Miami FL 33165-7552

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai00646

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Martha E. Cepero

Mailing Address 1801 S.W. 99Th Place

City State Zip Code
Miami FL 33165-7552

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00647

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Marion Cernac

Mailing Address 2141 La Madrona Drive

City State Zip Code
Santa Cruz CA 95060-1042

FEC ID number of contributing federal political committee. **C**

Name of Employer Quality Home Care Occupation Home Care

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai00648

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

400.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 223 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey J. Chad

Mailing Address 3525 Caruth Blvd.

City State Zip Code
Dallas TX 75225-5002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Riechad U. S. A., Inc. Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00649

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Harriet Chafee

Mailing Address 20 Stone Tower Lane

City State Zip Code
Barrington RI 02806-4914

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00650

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Harriet Chafee

Mailing Address 20 Stone Tower Lane

City State Zip Code
Barrington RI 02806-4914

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00651

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 224 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. David B. Chaffe, III

Mailing Address 1546 Jefferson Avenue

City State Zip Code
New Orleans LA 70115-4121

FEC ID number of contributing federal political committee. **C**

Name of Employer
Chaffe & Associates, Inc. Occupation
Investment Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	9

Transaction ID: 2009M04L11ai00652

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Evan Chaffey

Mailing Address 215 Sunbury Street

City State Zip Code
Providence RI 02908-1324

FEC ID number of contributing federal political committee. **C**

Name of Employer
Retired Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai00653

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Evan Chaffey

Mailing Address 215 Sunbury Street

City State Zip Code
Providence RI 02908-1324

FEC ID number of contributing federal political committee. **C**

Name of Employer
Retired Occupation
Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: 2009M04L11ai00654

Amount of Each Receipt this Period
200.00

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 225 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Kevin G. Champagne

Mailing Address 345 Thames Street
Unit 505

City Bristol State RI Zip Code 02809-1979

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai00655

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. William Belt Chandler

Mailing Address 7400 Lakeshore Dr.

City Quinton State VA Zip Code 23141-1158

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00656

Amount of Each Receipt this Period
110.00

C.

Full Name (Last, First, Middle Initial)
Mr. Philip Chapman

Mailing Address 2956 East Del Mar Blvd.
Apartment 243

City Pasadena State CA Zip Code 91107-4388

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 650.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai00657

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

710.00

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 226 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Philip Chapman

Mailing Address 2956 East Del Mar Blvd.
Apartment 243

City Pasadena State CA Zip Code 91107-4388

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00658

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Philip Chapman

Mailing Address 2956 East Del Mar Blvd.
Apartment 243

City Pasadena State CA Zip Code 91107-4388

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00659

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Nestor R. Charriez

Mailing Address 4 Wheatley Court

City Scotch Plains State NJ Zip Code 07076-2545

FEC ID number of contributing federal political committee. **C**

Name of Employer Harrison Scott Publications, Inc. Occupation Accountant/Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00660

Amount of Each Receipt this Period 2500.00

SUBTOTAL of Receipts This Page (optional) ► 2700.00

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 227 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Mr. Neal Chastain</p> <p>Mailing Address 4022 18Th Street Apartment 12C</p> <p>City Lubbock State TX Zip Code 79416-6027</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 275.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2009</p> <p>Transaction ID: 2009M04L11ai00661</p> <p>Amount of Each Receipt this Period 100.00</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Mr. Neal Chastain</p> <p>Mailing Address 4022 18Th Street Apartment 12C</p> <p>City Lubbock State TX Zip Code 79416-6027</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 275.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2009</p> <p>Transaction ID: 2009M04L11ai00662</p> <p>Amount of Each Receipt this Period 75.00</p>
---	---

<p>C. Full Name (Last, First, Middle Initial) Mr. Ara A. Cherchian</p> <p>Mailing Address 3100 Nagawicka Road</p> <p>City Hartland State WI Zip Code 53029-9355</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2009</p> <p>Transaction ID: 2009M04L11ai00663</p> <p>Amount of Each Receipt this Period 300.00</p>
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SUBTOTAL of Receipts This Page (optional)	475.00
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 228 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert E Chesebro

Mailing Address 216 Euclid Avenue

City State Zip Code
Sheboygan WI 53083

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Wigwam Mills Inc. Ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00664

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. H. R. Cheshire

Mailing Address P.O. Box 1610

City State Zip Code
Statesboro GA 30459-1610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai00665

Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. H. R. Cheshire

Mailing Address P.O. Box 1610

City State Zip Code
Statesboro GA 30459-1610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai00666

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **610.00**

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 229 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Victor Chigas, Sr.
 Mailing Address 118 N. Clinton Street
Suite 150
 City Chicago State IL Zip Code 60661-2394
 Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai00667
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Self-Employed Occupation Self-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

B. Full Name (Last, First, Middle Initial)
Md. James Childers
 Mailing Address 3901 Se Saint Lucie Blvd.
 City Stuart State FL Zip Code 34997-6184
 Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai00668
 Amount of Each Receipt this Period 50.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 470.00

C. Full Name (Last, First, Middle Initial)
Dr. Hoyt A Childs
 Mailing Address 6611 Lizzie Lane
 City Owens Cross Roads State AL Zip Code 35763-9358
 Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00669
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Self Occupation Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional) ► 250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 230 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Connie L. Chin

Mailing Address 19352 Trino Circle

City State Zip Code
Yorba Linda CA 92886-5537

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00670

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Vincent R. Chiodo

Mailing Address 1415 County Road 4857

City State Zip Code
Dilley TX 78017-4509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00671

Amount of Each Receipt this Period
220.00

C. Full Name (Last, First, Middle Initial)
Mr. Vincent R. Chiodo

Mailing Address 1415 County Road 4857

City State Zip Code
Dilley TX 78017-4509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00672

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► 730.00

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 231 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Do Choe

Mailing Address 6103 Aberdeen Avenue

City State Zip Code
Dallas TX 75230-5003

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00673

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Miss Margaret M. Christ

Mailing Address 2520 Witters Street

City State Zip Code
Saginaw MI 48602-3863

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00674

Amount of Each Receipt this Period
140.00

C.

Full Name (Last, First, Middle Initial)
Mr. R. Keith Christensen

Mailing Address 2345 Newfound Harbor Drive

City State Zip Code
Merritt Island FL 32952-2840

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00675

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **1340.00**

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 232 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. R. Keith Christensen

Mailing Address 2345 Newfound Harbor Drive

City State Zip Code
Merritt Island FL 32952-2840

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai00676

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. David C. Christian, II

Mailing Address 3740 N. Lake Shore Drive
Apartment 2A

City State Zip Code
Chicago IL 60613-4201

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai00677

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald G. Christian

Mailing Address 3443 Mandeville Canyon Road

City State Zip Code
Los Angeles CA 90049-1019

FEC ID number of contributing federal political committee. **C**

Name of Employer Rivers & Christian Occupation Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00678

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 233 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frank R. Christian

Mailing Address 411 Ashland Avenue
Apartment 6D

City River Forest State IL Zip Code 60305-1855

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00679

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Langdon Taylor Christian, IV

Mailing Address 13 Partridge Hill Road

City Richmond State VA Zip Code 23238-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00680

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Langdon Taylor Christian, IV

Mailing Address 13 Partridge Hill Road

City Richmond State VA Zip Code 23238-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00681

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 234 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. John Christiansen		Date of Receipt MM / DD / YYYY 03 / 31 / 2009		
	Mailing Address 1312 Bighorn Road		Transaction ID: 2009M04L11ai00682		
	City Helena	State MT	Zip Code 59602-7611	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer Us Government		Occupation Ret.	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ms. Elizabeth K. Christie		Date of Receipt MM / DD / YYYY 03 / 18 / 2009		
	Mailing Address 2019 North Kenmore Avenue		Transaction ID: 2009M04L11ai00683		
	City Chicago	State IL	Zip Code 60614-4107	Amount of Each Receipt this Period 30400.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer Retired		Occupation Retired	Aggregate Year-to-Date ▼ 30400.00	

C.	Full Name (Last, First, Middle Initial) Dr. Brian S. Christine		Date of Receipt MM / DD / YYYY 03 / 13 / 2009		
	Mailing Address 506 Dexter Ave.		Transaction ID: 2009M04L11ai00684		
	City Mountain Brook	State AL	Zip Code 35213	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	Name of Employer Urology Centers Of Alabama		Occupation Physician	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	30750.00
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 235 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Wilkin Chu
Mailing Address 41-47 150th Street
City Flushing State NY Zip Code 11355-1023
FEC ID number of contributing federal political committee. **C**
Name of Employer Wilkin Chu & Associates Occupation Insurance Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00685
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Burton Chubeck
Mailing Address 6230 Buckingham Street
City Sarasota State FL Zip Code 34238-2757
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00686
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. James B. Church
Mailing Address 3620 Sw 309Th Street
City Federal Way State WA Zip Code 98023-2196
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai00687
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 236 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James B. Church

Mailing Address 3620 Sw 309Th Street

City State Zip Code
Federal Way WA 98023-2196

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00688

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Howard Cicon

Mailing Address 168 Bradley Blvd.

City State Zip Code
Richland WA 99352-4386

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00689

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Phyllis J. Ciez

Mailing Address 11524 119Th Avenue

City State Zip Code
Cedar Lake IN 46303-9769

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00690

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **2550.00**

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 237 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Edgar Cintron

Mailing Address 1360 Covelanding Drive

City State Zip Code
Atlantic Beach FL 32233-6385

FEC ID number of contributing federal political committee. **C**

Name of Employer Surface Tech. Corp. Occupation Floor Mech.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 5 / 2 0 0 9

Transaction ID: 2009M04L11ai00691

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Deborah Cirabisi

Mailing Address 4 Peconic Court

City State Zip Code
Commack NY 11725-1346

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai00692

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald King Cirillo

Mailing Address 2 Long Woods Lane

City State Zip Code
East Hampton NY 11937-1259

FEC ID number of contributing federal political committee. **C**

Name of Employer Solomon, Smith & Barney, Inc. Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 1 2 / 2 0 0 9

Transaction ID: 2009M04L11ai00693

Amount of Each Receipt this Period
300.00

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 238 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Gary J. Clancey

Mailing Address 3351 Green Cliffs Road

City Anacortes State WA Zip Code 98221-8250

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 26 / 2009

Transaction ID: 2009M04L11ai00694

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles D. Clark

Mailing Address 3885 Lander Road Unit 5

City Chagrin Falls State OH Zip Code 44022-3702

FEC ID number of contributing federal political committee. **C**

Name of Employer The University of Akron Occupation Administrator/Lobbyist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai00695

Amount of Each Receipt this Period 220.00

C. Full Name (Last, First, Middle Initial)
Mr. James M. Clark

Mailing Address 350 Seaspray Avenue

City Palm Beach State FL Zip Code 33480-0042

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai00696

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 970.00

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 239 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. James R. Clark

Mailing Address 136 Woodland Ranch Road

City State Zip Code
Boerne TX 78015-8341

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai00697

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Mayree C. Clark

Mailing Address 14 E. 93Rd Street
#Morgan

City State Zip Code
New York NY 10128-0610

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai00698

Amount of Each Receipt this Period
275.00

C.

Full Name (Last, First, Middle Initial)
Nancy & Buck Clark

Mailing Address 570 Glenwood Road

City State Zip Code
Pasco WA 99301-8661

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai00699

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ▶

525.00

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 240 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Nancy & Buck Clark

Mailing Address 570 Glenwood Road

City Pasco State WA Zip Code 99301-8661

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai00700

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Nancy & Buck Clark

Mailing Address 570 Glenwood Road

City Pasco State WA Zip Code 99301-8661

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai00701

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard L. Clark

Mailing Address 575 Holland Dive

City Fortson State GA Zip Code 31808-3707

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2009

Transaction ID: 2009M04L11ai00702

Amount of Each Receipt this Period 250.00

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 241 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thomas J. Clark

Mailing Address 4510 Pine Mountain Road

City Birmingham State AL Zip Code 35213-1828

FEC ID number of contributing federal political committee. **C**

Name of Employer Kellogg Brown Root Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 950.00

Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai00703
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. William M. Clark

Mailing Address 554 Scattergood Court

City Morrisville State PA Zip Code 19067-1851

FEC ID number of contributing federal political committee. **C**

Name of Employer Evonik-Degossa Corporation Occupation E.S.H.Q. Compliance Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai00704
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Edwin V. Clarke, Jr.

Mailing Address 629 Academy Ave

City Sewickley State PA Zip Code 15143-1171

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai00705
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 900.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Richard E. Clarke	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 14923 S.E. 364Th Street	Transaction ID: 2009M04L11ai00706
	City Auburn State WA Zip Code 98092-9404	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Joseph Clarkson	Date of Receipt MM / DD / YYYY 03 / 25 / 2009
	Mailing Address 26233 187Th Place S.E.	Transaction ID: 2009M04L11ai00707
	City Covington State WA Zip Code 98042-8440	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Norman O. Clary	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 4417 Laurel Road	Transaction ID: 2009M04L11ai00708
	City Alexandria State VA Zip Code 22309-2522	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 243 / 1945		
	<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

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. David H. Classon

Mailing Address P.O. Box 298

City State Zip Code
Newport VT 05855-0298

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai00709

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Gerald Cleary

Mailing Address 79517 Liga

City State Zip Code
La Quinta CA 92253-4841

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00710

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joseph A. Cleary

Mailing Address 4621 Windsor Ridge Drive

City State Zip Code
Irving TX 75038-6313

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00711

Amount of Each Receipt this Period
120.00

SUBTOTAL of Receipts This Page (optional) ► **520.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 244 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. William T. Cleary, Jr.		Date of Receipt
	Mailing Address 561 Asharoken Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2009
	City	State	Zip Code
	Northport	NY	11768-1121
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00712
Name of Employer USI Consulting Group		Occupation Actuary	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 220.00

B.	Full Name (Last, First, Middle Initial) Mr. John A. Clees		Date of Receipt
	Mailing Address 4342 Sunset Beach Drive N.W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 11 / 2009
	City	State	Zip Code
	Olympia	WA	98502-1570
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00713
Name of Employer R.S.M. Mc Gloder		Occupation C.P.A.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) Mr. Walter Clemens		Date of Receipt
	Mailing Address 3490 Blackhawk Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 26 / 2009
	City	State	Zip Code
	Lafayette	CA	94549-2347
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00714
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 720.00
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 245 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William P. Clements, Jr.

Mailing Address 1901 N. Akard Street
Cumberland Hill

City Dallas State TX Zip Code 75201-2305

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00715
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Edsel L. Cleveland

Mailing Address 11905 Hutcheson Ferry Road

City Palmetto State GA Zip Code 30268-2132

FEC ID number of contributing federal political committee. **C**

Name of Employer Nationwide Occupation Trucking

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 349.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai00716
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Julia Cline-Sellers

Mailing Address 5 Woodhill Circle

City Columbia State SC Zip Code 29209

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai00717
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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 246 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Peter Cloeren		Date of Receipt MM / DD / YYYY 03 / 30 / 2009		
	Mailing Address 6325 Bent Water Dr		Transaction ID: 2009M04L11ai00718		
	City Orange	State TX	Zip Code 77632	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Cloeren Incorporated	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Dr. Dale E. Cloyd		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 310 S. Fayette Street		Transaction ID: 2009M04L11ai00719		
	City Alexandria	State VA	Zip Code 22314-5903	Amount of Each Receipt this Period 180.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Walter Reed	Occupation Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Alan J. Cobb		Date of Receipt MM / DD / YYYY 03 / 31 / 2009		
	Mailing Address 3121 Adrian Place		Transaction ID: 2009M04L11ai00720		
	City Falls Church	State VA	Zip Code 22044-1802	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Department Of Energy	Occupation Senior Policy Advisor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	930.00
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 247 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. W. R. Cobb

Mailing Address 336 E. Coconut Palm Road

City State Zip Code
Boca Raton FL 33432-7916

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai00721

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Kenneth Irwin Coco

Mailing Address 225 Deer Crossing Way

City State Zip Code
Henderson NV 89012-2289

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai00722

Amount of Each Receipt this Period
220.00

C. Full Name (Last, First, Middle Initial)
Mr. James R. Coffee

Mailing Address 5724 Hagen Court

City State Zip Code
Dallas TX 75252-4971

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai00723

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1470.00**

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 248 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Steve Coffield		Date of Receipt	
	Mailing Address 911 Reverdy Lane		M M / D D / Y Y Y Y Y 03 / 05 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai00724
	Matthews	NC	28105-6804	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Requested		Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

B.	Full Name (Last, First, Middle Initial) Mrs. Sandra Coffman		Date of Receipt	
	Mailing Address P.O. Box 10625		M M / D D / Y Y Y Y Y 03 / 10 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai00725
	Fort Smith	AR	72917-0625	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		600.00		

C.	Full Name (Last, First, Middle Initial) Mrs. Sandra Coffman		Date of Receipt	
	Mailing Address P.O. Box 10625		M M / D D / Y Y Y Y Y 03 / 31 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai00726
	Fort Smith	AR	72917-0625	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		600.00		

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 249 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. David B. Cogdill

Mailing Address 221 Scurry Pass

City State Zip Code
Georgetown TX 78633-4929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai00727

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Col. David R. Coggins

Mailing Address 20550 Huebner Road
Unit 132

City State Zip Code
San Antonio TX 78258-3980

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00728

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Ms. Debra Cohen

Mailing Address 1610 W. Coast Highway

City State Zip Code
Newport Beach CA 92663-5029

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Newport Beach Veterin-
ary H Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai00729

Amount of Each Receipt this Period

100.00

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 250 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Mark L. Cohen

Mailing Address 125 Chestnut Street

City State Zip Code
Concord MA 01742-2646

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
O P R S INC Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai00730

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Ms Mary Cohen

Mailing Address 1350 E Flamingo Road
Suite 562

City State Zip Code
Las Vegas NV 89119-5271

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Designer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: 2009M04L11ai00731

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Dr. Michael L. Cohen

Mailing Address 510 Blair Avenue

City State Zip Code
Piedmont CA 94611-3735

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Resp Med Group,inc Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 0 9

Transaction ID: 2009M04L11ai00732

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Kathryn S. Colachis	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 1001 Genter Street Ph 9	Transaction ID: 2009M04L11ai00733
	City State Zip Code La Jolla CA 92037-5539	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

B.	Full Name (Last, First, Middle Initial) Dr. & Mrs. F. Hammond Cole, Jr.	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 6195 Boskey Drive	Transaction ID: 2009M04L11ai00734
	City State Zip Code Millington TN 38053-6901	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ann Renners Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

C.	Full Name (Last, First, Middle Initial) Mr. Gerald M. Cole	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 680 N. Lake Shore Drive Unit 824	Transaction ID: 2009M04L11ai00735
	City State Zip Code Chicago IL 60611-8702	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Sally S. Cole		Date of Receipt
	Mailing Address P.O. Box 6190		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Carefree	AZ	85377-6190
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Homemaker		Occupation Homemaker	Transaction ID: 2009M04L11ai00736
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="100.00"/>

B.	Full Name (Last, First, Middle Initial) Ms. Sally S. Cole		Date of Receipt
	Mailing Address P.O. Box 6190		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Carefree	AZ	85377-6190
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Homemaker		Occupation Homemaker	Transaction ID: 2009M04L11ai00737
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="100.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Charles A. Coleman		Date of Receipt
	Mailing Address 6803 Fallbrook Court		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Colleyville	TX	76034-6571
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Requested		Occupation Requested	Transaction ID: 2009M04L11ai00738
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="300.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500.00"/>
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 253 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Douglas R. Coleman, Jr.

Mailing Address 140 S. Brown Road

City State Zip Code
Long Lake MN 55356-9134

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai00739

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Dennis J. Colgan, Jr.

Mailing Address 12 Cove Road

City State Zip Code
Moorestown NJ 08057-3950

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Barthco Intl. Inc. C.E.O.

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai00740

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael E. Colgrove

Mailing Address P.O. Box 2183

City State Zip Code
Homer AK 99603-2183

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai00741

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 254 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Michael E. Colgrove
Mailing Address P.O. Box 2183
City Homer State AK Zip Code 99603-2183
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00742
Amount of Each Receipt this Period 110.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael E. Colgrove
Mailing Address P.O. Box 2183
City Homer State AK Zip Code 99603-2183
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00
Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai00743
Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Mr. Malcolm E. Collier, Jr.
Mailing Address 3045 Gardenia Street
City Golden State CO Zip Code 80401-6205
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00744
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ▶ 620.00
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 255 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James E. Collings

Mailing Address 410 38Th Street

City State Zip Code
Newport Beach CA 92663-3219

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00745

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
James Collins

Mailing Address 6606 Tenth St. A-1

City State Zip Code
Alexandria VA 22307-6606

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai00746

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. John Collins

Mailing Address 2199 S. Sailors Way

City State Zip Code
Gilbert AZ 85295-5453

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai00747

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 256 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joseph J. Collins

Mailing Address Fort L.J. Mc Nair
National War College

City Washington State DC Zip Code 20319-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer Department Of Defense Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: 2009M04L11ai00748
Amount of Each Receipt this Period: 220.00

B. Full Name (Last, First, Middle Initial)
Price Collins

Mailing Address 2509 Cove Hollow Ct.

City Rowlett State TX Zip Code 75088

FEC ID number of contributing federal political committee. **C**

Name of Employer Wilson, Elser Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai00749
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Ronnie E. Collins

Mailing Address 1411 Gentle Way

City Prosper State TX Zip Code 75078-9523

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai00750
Amount of Each Receipt this Period: 220.00

SUBTOTAL of Receipts This Page (optional) ▶ 690.00

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 257 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Virginia Collins

Mailing Address 940 Tournament Drive

City Hillsborough State CA Zip Code 94010-7428

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 10 / 2009
Transaction ID: 2009M04L11ai00751
 Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Ms. Wanda J. Collins

Mailing Address 104 Old Brook Court

City Norman State OK Zip Code 73072-4555

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 03 / 2009
Transaction ID: 2009M04L11ai00752
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. David Colville

Mailing Address 1275 County Road 17

City Del Norte State CO Zip Code 81132-9759

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 18 / 2009
Transaction ID: 2009M04L11ai00753
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1450.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 258 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Nelson Colvin

Mailing Address 8754 Jumilla Avenue

City Northridge State CA Zip Code 91324-3322

FEC ID number of contributing federal political committee. **C**

Name of Employer Golden Oak Coop Corporation
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00754

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. David Combs

Mailing Address 30 W. Glenchester Drive

City Long Beach State CA Zip Code 90805-6926

FEC ID number of contributing federal political committee. **C**

Name of Employer The Terms Company
Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00755

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles Compton

Mailing Address P.O. Box 1084

City Addison State TX Zip Code 75001-1084

FEC ID number of contributing federal political committee. **C**

Name of Employer Mission Foods
Occupation Procurement Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00756

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 259 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William P. Conboy

Mailing Address 3 Andrea Way

City State Zip Code
Califon NJ 07830-3403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00757

Amount of Each Receipt this Period
275.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert Condon

Mailing Address P.O. Box 1187

City State Zip Code
Oakley CA 94561-1187

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Uss/Posco Mechanic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00758

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. James M. Conlin, Jr.

Mailing Address 1531 Winslow Dr.

City State Zip Code
Hudson OH 44236-4604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00759

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► **840.00**

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 260 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Daniel Connealy

Mailing Address 2108 W. 114Th Street

City Leawood State KS Zip Code 66211-3060

FEC ID number of contributing federal political committee. **C**

Name of Employer Waddell & Reid Financial Inc. Occupation C.F.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai00760

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Robert Conner

Mailing Address 4601 S Balsam Way Apt 313

City Littleton State CO Zip Code 80123-5440

FEC ID number of contributing federal political committee. **C**

Name of Employer Jeppesen Occupation Supervisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai00761

Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael G. Connolly

Mailing Address 75 Fernwood Road

City Larchmont State NY Zip Code 10538-1705

FEC ID number of contributing federal political committee. **C**

Name of Employer H.S.B.C. Bank U.S.A. Occupation Precious Metals Trader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai00762

Amount of Each Receipt this Period 750.00

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 261 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Randal G. Conrads

Mailing Address 14201 S.E. Petrovitsky Road
#A3-382

City Renton State WA Zip Code 98058-8986

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai00763
 Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial)
Kevin Conroy

Mailing Address 19915 N 102nd PI

City Scottsdale State AZ Zip Code 85255

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Business Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00764
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Cheryl Cook

Mailing Address 106 Nolan Circle

City Marietta State OH Zip Code 45750-1237

FEC ID number of contributing federal political committee. **C**

Name of Employer Marietta City Schools, Marietta Ohio Occupation Elementary Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai00765
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 3250.00

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 262 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Jon S. & Janet Cook

Mailing Address 555 5Th Avenue N.E.
Unit 524

City State Zip Code
St. Petersburg FL 33701-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00766

Amount of Each Receipt this Period
85.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard Cook

Mailing Address 8299 Garden View Road N.

City State Zip Code
Nisswa MN 56468-2423

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00767

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Ms. Liliane F. Cooke

Mailing Address 829 71St Street
Apartment 2

City State Zip Code
Brooklyn NY 11228-1016

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
775.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00768

Amount of Each Receipt this Period
275.00

SUBTOTAL of Receipts This Page (optional) ▶ **460.00**

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 263 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Michael R. Cooke

Mailing Address 407 Queensway Road

City Richmond State VA Zip Code 23236-3152

FEC ID number of contributing federal political committee. **C**

Name of Employer: Cooke's Delivery Service Occupation: Delivery Driver

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai00769
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael R. Cooke

Mailing Address 407 Queensway Road

City Richmond State VA Zip Code 23236-3152

FEC ID number of contributing federal political committee. **C**

Name of Employer: Cooke's Delivery Service Occupation: Delivery Driver

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 17 / 2009
Transaction ID: 2009M04L11ai00770
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Retha Cooke

Mailing Address 600 Angela Lane

City Greenville State TX Zip Code 75402-3326

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai00771
Amount of Each Receipt this Period: 200.00

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 264 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Walter F. Cooley, III

Mailing Address 2015 Wilderness Point Drive

City State Zip Code
Kingwood TX 77339-2238

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
North Harris Montgomery Director Of Risk Management
Commun. Collge.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	9	

Transaction ID: 2009M04L11ai00772

Amount of Each Receipt this Period
220.00

B. Full Name (Last, First, Middle Initial)
Mr. John A. Cooney

Mailing Address 3323 N. Bunchberry Way

City State Zip Code
Boise ID 83704-0717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	9	

Transaction ID: 2009M04L11ai00773

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Allen W Cooper

Mailing Address 3512 S. 15th Street

City State Zip Code
Arlington VA 22204-5011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Xerox Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	9	

Transaction ID: 2009M04L11ai00774

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **420.00**

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 265 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Allen W Cooper
Mailing Address 3512 S. 15th Street
City Arlington State VA Zip Code 22204-5011
FEC ID number of contributing federal political committee. **C**
Name of Employer Xerox Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai00775
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Bruce Cooper
Mailing Address 143 Barksdale Lane
City Mooresville State NC Zip Code 28117-6613
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai00776
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Cleve R. Cooper
Mailing Address 2620 E. Hiawatha Drive
City Wasilla State AK Zip Code 99654-2853
FEC ID number of contributing federal political committee. **C**
Name of Employer State Of Aaska Dot/Pf Occupation Lab Technician (Retired)
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00
Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai00777
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00
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 266 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ted & Wilma Cooper

Mailing Address 2069 County Road 240

City Durango State CO Zip Code 81301-7951

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai00778
Amount of Each Receipt this Period: 220.00

B. Full Name (Last, First, Middle Initial)
Mrs. Faith Copeland

Mailing Address 7501 Anaqua Drive

City Austin State TX Zip Code 78750-7913

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 384.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai00779
Amount of Each Receipt this Period: 99.00

C. Full Name (Last, First, Middle Initial)
Mr. Allan W. Corcoran

Mailing Address 9414 Parkwood Court

City Fort Myers State FL Zip Code 33908-2857

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai00780
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 369.00

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 267 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Allan W. Corcoran

Mailing Address 9414 Parkwood Court

City State Zip Code
Fort Myers FL 33908-2857

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00781

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Carl D. Corley

Mailing Address 2905 N. 32Nd Street

City State Zip Code
Fort Smith AR 72904-4202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Carco Rentals Inc. C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai00782

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Rosalie M. Cornell

Mailing Address 1010 Scott Park Drive
Apartment 302

City State Zip Code
Iowa City IA 52245-3979

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00783

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► 1115.00

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 268 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Ms. Rosalie M. Cornell

Mailing Address 1010 Scott Park Drive
 Apartment 302

City Iowa City State IA Zip Code 52245-3979

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai00784
 Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
 Ms. Rosalie M. Cornell

Mailing Address 1010 Scott Park Drive
 Apartment 302

City Iowa City State IA Zip Code 52245-3979

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai00785
 Amount of Each Receipt this Period 65.00

C. Full Name (Last, First, Middle Initial)
 Ms. Lila L. Correa

Mailing Address 5810 Cross Creek Circle

City Tyler State TX Zip Code 75703-0506

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00786
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► **265.00**

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 269 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Pat Corrigan

Mailing Address 3645 90Th Avenue

City State Zip Code
Vero Beach FL 32966-6661

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00787

Amount of Each Receipt this Period
180.00

B. Full Name (Last, First, Middle Initial)
Mrs. Helen L. Corsentino

Mailing Address 1211 S. Prairie Avenue
Unit 2001

City State Zip Code
Chicago IL 60605-2828

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00788

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Helen L. Corsentino

Mailing Address 1211 S. Prairie Avenue
Unit 2001

City State Zip Code
Chicago IL 60605-2828

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai00789

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 305.00

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 270 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Helen L. Corsentino

Mailing Address 1211 S. Prairie Avenue
Unit 2001

City State Zip Code
Chicago IL 60605-2828

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	0	9

Transaction ID: 2009M04L11ai00790

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Joanne Corsiglia

Mailing Address P.O. Box 869

City State Zip Code
Osterville MA 02655-0869

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	9

Transaction ID: 2009M04L11ai00791

Amount of Each Receipt this Period

1100.00

C.

Full Name (Last, First, Middle Initial)
Sarah Corum

Mailing Address 1123 N Comstock St

City State Zip Code
Visalia CA 93292-4403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ret. Ret.

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	0	9

Transaction ID: 2009M04L11ai00792

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 271 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John G. Corwin

Mailing Address 4449 Meandering Way

City State Zip Code
Tallahassee FL 32308-5747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00793

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Michael J Cosgrove

Mailing Address 8 Mill Pond Lane

City State Zip Code
New Rochelle NY 10805

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ge Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00794

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. George A. Costan

Mailing Address 501 V. East Road
Apt. B306

City State Zip Code
Lynchburg VA 24503-4368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00795

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 1700.00

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 272 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Anthony P. Costella

Mailing Address 810 N.C. Highway 343 N.

City State Zip Code
Camden NC 27921-8315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai00796

Amount of Each Receipt this Period
105.00

B.

Full Name (Last, First, Middle Initial)
Mr. Joseph V. Costello

Mailing Address 1880 Lombard Street

City State Zip Code
San Francisco CA 94123-2910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai00797

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. D. Eileen Cotnam

Mailing Address 1671 N.W. Vale Court

City State Zip Code
Roseburg OR 97471-1788

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai00798

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ▶

465.00

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 273 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Brenda Cotter

Mailing Address P.O. Box 459

City State Zip Code
Stockdale TX 78160-0459

FEC ID number of contributing federal political committee. **C**

Name of Employer Cotter Resources, Inc. Occupation CEO, President, Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00799

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark D. Cotterell

Mailing Address 2214 E. Oak Avenue

City State Zip Code
Hainesport NJ 08036-3520

FEC ID number of contributing federal political committee. **C**

Name of Employer Integrated Laminate Systems Occupation C.N.C. Operator Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00800

Amount of Each Receipt this Period
155.00

C. Full Name (Last, First, Middle Initial)
Mr. James V. Cottrell

Mailing Address 3405 N.E. Royal Oaks Drive

City State Zip Code
Vancouver WA 98662-5421

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00801

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **505.00**

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 274 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Charlotte Couillard

Mailing Address 33228 Road 132

City Visalia State CA Zip Code 93292-9386

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai00802

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Harold B. Coulter

Mailing Address 1117 Wedgewood Court

City Decatur State IL Zip Code 62526-9795

FEC ID number of contributing federal political committee. **C**

Name of Employer Swartz Properties Occupation Real Estate Property Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai00803

Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas Courduff

Mailing Address 2410 Camp Rock Hill Road

City Quakertown State PA Zip Code 18951-2200

FEC ID number of contributing federal political committee. **C**

Name of Employer Warwick Township Water & Sewer Authority Occupation Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai00804

Amount of Each Receipt this Period 100.00

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 275 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. L. Kirk Courson

Mailing Address P.O. Box 809

City State Zip Code
Perryton TX 79070-0809

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00805

Amount of Each Receipt this Period 1500.00

B. Full Name (Last, First, Middle Initial)
Mr. Q. P. Courtney, III

Mailing Address P.O. Box 10004

City State Zip Code
Midland TX 79702-7004

FEC ID number of contributing federal political committee. **C**

Name of Employer H.L. Brown Operating L.L.-C. Occupation Interior Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00806

Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
Mr. Sam A. Covelli

Mailing Address 3900 E. Market Street

City State Zip Code
Warren OH 44484-4708

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00807

Amount of Each Receipt this Period 550.00

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 276 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Margaret P. Cowden

Mailing Address 1 Churchill Way

City State Zip Code
Midland TX 79705-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai00808

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. R. M. Coyle

Mailing Address 401 E. State Street

City State Zip Code
Rockford IL 61104-1027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai00809

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mr. John Coyne, Jr.

Mailing Address 10 Bergen Avenue

City State Zip Code
Voorhees NJ 08043-1217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00810

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 277 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Lometa J. Cragg

Mailing Address P.O. Box 458

City Marfa State TX Zip Code 79843-0458

FEC ID number of contributing federal political committee. **C**

Name of Employer Faith Alive Cowboy Church Occupation Pastor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai00811
 Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Dr. James F. Cramer

Mailing Address 656 N. Mac Donald

City Mesa State AZ Zip Code 85201-5020

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai00812
 Amount of Each Receipt this Period: 135.00

C. Full Name (Last, First, Middle Initial)
Mrs. Nancy M. Crandall

Mailing Address 41688 Via Aregio

City Palm Desert State CA Zip Code 92260-1745

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai00813
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **535.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Guy R. Crane		Date of Receipt
	Mailing Address 77 E. Walton Street Suite 26C		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 10 / 2009
	City	State	Zip Code
	Chicago	IL	60611-2299
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00814
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	250.00

B.	Full Name (Last, First, Middle Initial) Miss Susan F. Crary		Date of Receipt
	Mailing Address 1015 Fox Hill Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	State College	PA	16803-1822
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00815
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4625.00	325.00

C.	Full Name (Last, First, Middle Initial) Miss Susan F. Crary		Date of Receipt
	Mailing Address 1015 Fox Hill Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 16 / 2009
	City	State	Zip Code
	State College	PA	16803-1822
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00816
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4625.00	300.00

SUBTOTAL of Receipts This Page (optional)	875.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 279 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Miss Susan F. Crary

Mailing Address 1015 Fox Hill Road

City State Zip Code
State College PA 16803-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	9	

Transaction ID: 2009M04L11ai00817

Amount of Each Receipt this Period

325.00

B. Full Name (Last, First, Middle Initial)
Miss Susan F. Crary

Mailing Address 1015 Fox Hill Road

City State Zip Code
State College PA 16803-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	9	

Transaction ID: 2009M04L11ai00818

Amount of Each Receipt this Period

300.00

C. Full Name (Last, First, Middle Initial)
Miss Susan F. Crary

Mailing Address 1015 Fox Hill Road

City State Zip Code
State College PA 16803-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 4625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	9	

Transaction ID: 2009M04L11ai00819

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) ►

925.00

TOTAL This Period (last page this line number only) ►

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**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 280 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Miss Susan F. Crary		Date of Receipt
	Mailing Address 1015 Fox Hill Road		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	State College	PA	16803-1822
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 2009M04L11ai00820
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="325.00"/>
		<input type="text" value="4625.00"/>	

B.	Full Name (Last, First, Middle Initial) Miss Susan F. Crary		Date of Receipt
	Mailing Address 1015 Fox Hill Road		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	State College	PA	16803-1822
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 2009M04L11ai00821
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
		<input type="text" value="4625.00"/>	

C.	Full Name (Last, First, Middle Initial) Miss Susan F. Crary		Date of Receipt
	Mailing Address 1015 Fox Hill Road		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	State College	PA	16803-1822
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 2009M04L11ai00822
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="325.00"/>
		<input type="text" value="4625.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="950.00"/>
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 281 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Miss Susan F. Crary

Mailing Address 1015 Fox Hill Road

City State Zip Code
State College PA 16803-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4625.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00823

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Miss Susan F. Crary

Mailing Address 1015 Fox Hill Road

City State Zip Code
State College PA 16803-1822

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4625.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00824

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Gerald Dean Crater

Mailing Address 1970 S. Tumbleweed Lane

City State Zip Code
Chandler AZ 85286-7018

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00825

Amount of Each Receipt this Period
75.00

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 282 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Gerald Dean Crater

Mailing Address 1970 S. Tumbleweed Lane

City State Zip Code
Chandler AZ 85286-7018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00826

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Mr. Theodore Crausway

Mailing Address 4000 Cathedral Avenue N.W.

City State Zip Code
Washington DC 20016-5207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00827

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mrs. Mary Kay Craven

Mailing Address 4 Fremontia Street

City State Zip Code
Portola Valley CA 94028-8032

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai00828

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **775.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 283 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William L. Cravens

Mailing Address 1 Treetops Lane
Apartment 402

City Little Rock State AR Zip Code 72202-1515

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00829
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. James H. Crawford

Mailing Address 527 Childers Lane

City Ringgold State GA Zip Code 30736-4010

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai00830
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. James H. Crawford

Mailing Address 527 Childers Lane

City Ringgold State GA Zip Code 30736-4010

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai00831
Amount of Each Receipt this Period 115.00

SUBTOTAL of Receipts This Page (optional) ▶ 665.00

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 284 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Jane Crawford

Mailing Address 1928 San Fernando Drive

City State Zip Code
Las Cruces NM 88011-4163

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai00832
Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. John W. Crawford

Mailing Address 709 County Road 445

City State Zip Code
Enterprise AL 36330-9713

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai00833
Amount of Each Receipt this Period: 60.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. John W. Crawford

Mailing Address 709 County Road 445

City State Zip Code
Enterprise AL 36330-9713

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai00834
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 260.00

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 285 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. John & Norma Crawford

Mailing Address 20128 Chateau Drive

City State Zip Code
Saratoga CA 95070-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Intel Corp. Computer Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00835

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Marjorie C. Crawford

Mailing Address 1103 Fleet Landing Blvd.

City State Zip Code
Atlantic Beach FL 32233-4589

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai00836

Amount of Each Receipt this Period
220.00

C. Full Name (Last, First, Middle Initial)
Mr. William Crawford

Mailing Address 3313 Eden Park Drive

City State Zip Code
Carmel IN 46033-3038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai00837

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 970.00

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 286 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. John Cremin	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address P.O. Box 529	Transaction ID: 2009M04L11ai00838
	City Ingram State TX Zip Code 78025-0529	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ret. Occupation Ret. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Robert Crews	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 419 Kansas Avenue	Transaction ID: 2009M04L11ai00839
	City Enid State OK Zip Code 73701-6634	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Royal D. Crider	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 134 Arsenault Crossing	Transaction ID: 2009M04L11ai00840
	City Kingston State TN Zip Code 37763-4236	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.00	

SUBTOTAL of Receipts This Page (optional)	1600.00
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 287 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Dennis Crispino

Mailing Address 658 Wolcott Road

City Bristol State CT Zip Code 06010-7161

FEC ID number of contributing federal political committee. **C**

Name of Employer Superior, Inc. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00841

Amount of Each Receipt this Period: 400.00

B. Full Name (Last, First, Middle Initial)
Mrs. Kimberly P Croce

Mailing Address 1716 Wisteria Way

City Roanoke State TX Zip Code 76262-9082

FEC ID number of contributing federal political committee. **C**

Name of Employer Housewife Occupation Housewife

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00842

Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Jack Crocker

Mailing Address 17480 Holy Names Dr.

City Lake Oswego State OR Zip Code 97034-5149

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00843

Amount of Each Receipt this Period: 600.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 288 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. David S. Crockett

Mailing Address 31088 Big Bear Drive

City	State	Zip Code
Evergreen	CO	80439-9679

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai00844

Amount of Each Receipt this Period
120.00

B.

Full Name (Last, First, Middle Initial)
Mr. David S. Crockett

Mailing Address 31088 Big Bear Drive

City	State	Zip Code
Evergreen	CO	80439-9679

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai00845

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. William Cromer

Mailing Address 2230 S. Patterson Blvd.

City	State	Zip Code
Dayton	OH	45409-1954

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2009

Transaction ID: 2009M04L11ai00846

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶

720.00

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 289 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Earlane B. Croom

Mailing Address 1421 Winrock Blvd.

City State Zip Code
Houston TX 77057-1729

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00847

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mrs. Linda Cross

Mailing Address 1705 E. 21St Street

City State Zip Code
Clovis NM 88101-3994

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Women's Medical Center Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai00848

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Virginia M. Crossland

Mailing Address 3131 Kelley Drive

City State Zip Code
Joplin MO 64804-1424

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00849

Amount of Each Receipt this Period
125.00

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 290 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert S. Crouch, Jr.

Mailing Address 11607 Highway 585

City State Zip Code
Oak Grove LA 71263-8249

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai00850

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Mary Cruce

Mailing Address 947 Rays Road

City State Zip Code
Stone Mountain GA 30083-1763

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai00851

Amount of Each Receipt this Period
220.00

C.

Full Name (Last, First, Middle Initial)
Mr. Donald Horace Crumpton

Mailing Address 232 County Road 221

City State Zip Code
Moulton AL 35650-6490

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai00852

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶

720.00

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 291 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Ernesto Cruz

Mailing Address 251 Crandon Blvd.
Apartment 307

City Key Biscayne State FL Zip Code 33149-1507

FEC ID number of contributing federal political committee. **C**

Name of Employer B.A.C. Florida Occupation Bank Director/International Lawyers

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai00853

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Diane Crystal

Mailing Address P.O. Box 3

City Waccabuc State NY Zip Code 10597-0003

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai00854

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jo Lynne Cszasz

Mailing Address 373 Allanhurst Avenue

City Vandalia State OH Zip Code 45377-1720

FEC ID number of contributing federal political committee. **C**

Name of Employer Smith's Aerospace Occupation Director Of Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai00855

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 800.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Leslie Cubelic	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 205 Fernly Park Drive	Transaction ID: 2009M04L11ai00856
	City State Zip Code Alpharetta GA 30022-6365	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Mr. Peter C. Cullen	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 10421 Woodbridge Street	Transaction ID: 2009M04L11ai00857
	City State Zip Code Toluca Lake CA 91602-2822	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Mr. Peter C. Cullen	Date of Receipt MM / DD / YYYY 03 / 18 / 2009
	Mailing Address 10421 Woodbridge Street	Transaction ID: 2009M04L11ai00858
	City State Zip Code Toluca Lake CA 91602-2822	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

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 293 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Edgar L. Culpepper

Mailing Address 206 Adams Street

City State Zip Code
Dumas AR 71639-2303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	9	

Transaction ID: 2009M04L11ai00859

Amount of Each Receipt this Period
80.00

B.

Full Name (Last, First, Middle Initial)

Mr. Capp A Culver

Mailing Address P.O. Box 608

City State Zip Code
Canadian TX 79014-0608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	9	

Transaction ID: 2009M04L11ai00860

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)

Miss P. Anne Cundle

Mailing Address 13656 Tenacity Lane

City State Zip Code
Tallahassee FL 32312-9536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 485.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	9	

Transaction ID: 2009M04L11ai00861

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ►

430.00

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 294 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Patricia Cunningham
Mailing Address 15 Tranquility Rd.
City Moneta State VA Zip Code 24121-5373
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai00862
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Rachel L. Cunningham
Mailing Address P.O. Box 713
City Brielle State NJ Zip Code 08730-0713
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai00863
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven H. Cunningham
Mailing Address 15 Tranquility Road
City Moneta State VA Zip Code 24121-5373
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai00864
Amount of Each Receipt this Period 750.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00
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 295 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Rickey Curley

Mailing Address 16 Green Farm Lane

City State Zip Code
Stockton NJ 08559-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Farmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00865

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
Dr. John F. Curry

Mailing Address 617 Mimosa Drive

City State Zip Code
Denton TX 76201-0858

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00866

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Mr. John D. Curtiss

Mailing Address 2005 Tenderfoot Drive

City State Zip Code
Larkspur CO 80118-8722

FEC ID number of contributing federal political committee. **C**

Name of Employer Double Cross Ranch Entertainment Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00867

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **5650.00**

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 296 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Andre E Cushing Iii
Mailing Address P.O. Box 687

City State Zip Code
Hampden ME 04444

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation
Realtor-Home Builder

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009
Transaction ID: 2009M04L11ai00868
Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. David F Cutler
Mailing Address 5008 Blue Water Lane

City State Zip Code
Dickinson TX 77539-6504

FEC ID number of contributing federal political committee. **C**

Name of Employer City Of Houston Occupation
Director Of Houston Emergency

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009
Transaction ID: 2009M04L11ai00869
Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. David Cuyler
Mailing Address 9000 Las Camas Road N.E.

City State Zip Code
Albuquerque NM 87111-2428

FEC ID number of contributing federal political committee. **C**

Name of Employer Sandia National Labs Occupation
Software Architect -Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009
Transaction ID: 2009M04L11ai00870
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 297 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Bernie Czarnecki

Mailing Address 12109 W. Lake Road

City East Springfield State PA Zip Code 16411-9105

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai00871

Amount of Each Receipt this Period 305.00

B. Full Name (Last, First, Middle Initial)
Mrs. Jadwiga Czuba

Mailing Address 209 E. Madison Street

City Lombard State IL Zip Code 60148-3462

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 02 / 2009

Transaction ID: 2009M04L11ai00872

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jadwiga Czuba

Mailing Address 209 E. Madison Street

City Lombard State IL Zip Code 60148-3462

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 02 / 2009

Transaction ID: 2009M04L11ai00873

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 405.00

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 298 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Jadwiga Czuba

Mailing Address 209 E. Madison Street

City State Zip Code
Lombard IL 60148-3462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00874

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mrs. Jadwiga Czuba

Mailing Address 209 E. Madison Street

City State Zip Code
Lombard IL 60148-3462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai00875

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jadwiga Czuba

Mailing Address 209 E. Madison Street

City State Zip Code
Lombard IL 60148-3462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00876

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 299 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Vincent Charles D' Andrea

Mailing Address 2 Elliot Place

City State Zip Code
Newport RI 02840-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer United States Post Office Occupation Postal Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt M M / D D / Y Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai00877

Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Mr. Vincent Charles D' Andrea

Mailing Address 2 Elliot Place

City State Zip Code
Newport RI 02840-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer United States Post Office Occupation Postal Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt M M / D D / Y Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai00878

Amount of Each Receipt this Period 40.00

C. Full Name (Last, First, Middle Initial)
Mr. Vincent Charles D' Andrea

Mailing Address 2 Elliot Place

City State Zip Code
Newport RI 02840-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer United States Post Office Occupation Postal Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt M M / D D / Y Y Y Y Y
03 / 12 / 2009

Transaction ID: 2009M04L11ai00879

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 170.00

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 300 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Vincent Charles D' Andrea

Mailing Address 2 Elliot Place

City State Zip Code
Newport RI 02840-1804

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United States Post Office Postal Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00880

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Stephen T Dabney

Mailing Address 3719 Aberdeen Way

City State Zip Code
Houston TX 77025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kpng Llp Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00881

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Fred Dacimo

Mailing Address 5520 Narrow River Road
Narrow River Marina

City State Zip Code
Orient NY 11957-1412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00882

Amount of Each Receipt this Period
200.00

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 301 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Carle E. Dahlstedt

Mailing Address 1143 Cenotaph Way

City State Zip Code
Colorado Springs CO 80904-1704

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai00883

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Harold Dail

Mailing Address 1016 N.C. Highway 11 S.

City State Zip Code
Kinston NC 28504-9441

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00884

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
Mr. Glen Daley

Mailing Address P.O. Box 2500
Mid State Correctional Facility

City State Zip Code
Marcy NY 13403-2500

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai00885

Amount of Each Receipt this Period
98.00

SUBTOTAL of Receipts This Page (optional) ► 308.00

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 302 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Steven G. Damolaris

Mailing Address 330 North 3Rd Avenue

City State Zip Code
Villa Park IL 60181-1959

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
City Of Elgin IL GIS Planner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	0	9

Transaction ID: 2009M04L11ai00886

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Bobby G. Dane

Mailing Address P.O. Box 731

City State Zip Code
Bowie TX 76230-0731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: 2009M04L11ai00887

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Bobby G. Dane

Mailing Address P.O. Box 731

City State Zip Code
Bowie TX 76230-0731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: 2009M04L11ai00888

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 303 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stephen Page Daniel

Mailing Address 827 Fox Hollow Pkwy.

City State Zip Code
Marietta GA 30068-2410

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
G.D.S. Associates, Inc. Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00889

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Daniel F. Daniels

Mailing Address 4403 W. Cleveland Street

City State Zip Code
Tampa FL 33609-2616

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai00890

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mrs. Julie J. Daniels

Mailing Address 2191 Kyle Road

City State Zip Code
Bartlesville OK 74006-6336

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai00891

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1650.00**

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 304 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Gholi Darehshori

Mailing Address 2402 Palm Ridge Road

City Sanibel State FL Zip Code 33957-3222

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai00892

Amount of Each Receipt this Period 750.00

B. Full Name (Last, First, Middle Initial)
Mr. Frederick R. Darling

Mailing Address 142 E. Robindale

City Las Vegas State NV Zip Code 89123-1117

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai00893

Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Daniel Dauenhauer

Mailing Address 2904 Everleigh Way

City Fairfax State VA Zip Code 22031-2054

FEC ID number of contributing federal political committee. **C**

Name of Employer Ewa Government Systems In-c. Occupation Resource and Policy Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai00894

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 305 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Donald Davidson

Mailing Address 40 Las Brisas Way

City State Zip Code
Naples FL 34108-8294

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00895

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. John R. Davidson

Mailing Address 5780 S. Goldsmith Place

City State Zip Code
Greenwood Village CO 80111-3522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
First American Bancorp Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00896

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Margaret B. Davidson

Mailing Address 611 N. Alpine Drive

City State Zip Code
Beverly Hills CA 90210-3303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00897

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **575.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 306 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Jean Davies

Mailing Address 64 Chestnut Street

City State Zip Code
New Providence NJ 07974-2329

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Davies Agencies Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai00898

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Antoinette Davis

Mailing Address 1004W W. A. Avenue

City State Zip Code
North Little Rock AR 72116-9186

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai00899

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
Mr. Carter Davis

Mailing Address 114 Cobb Road

City State Zip Code
Highlands NC 28741-9405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00900

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ▶ **720.00**

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 307 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Carter Davis

Mailing Address 114 Cobb Road

City State Zip Code
Highlands NC 28741-9405

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai00901

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
Mr. E. I. Davis

Mailing Address P.O. Drawer 428

City State Zip Code
Greenwood SC 29648-0428

FEC ID number of contributing federal political committee. **C**

Name of Employer Davis & Floyd, Inc. Occupation Civil Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00902

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Elaine Davis

Mailing Address 966 Wintook Drive

City State Zip Code
Ivins UT 84738-6438

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai00903

Amount of Each Receipt this Period
140.00

SUBTOTAL of Receipts This Page (optional) ► 350.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 308 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Elaine Davis

Mailing Address 966 Wintook Drive

City Ivins State UT Zip Code 84738-6438

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 26 / 2009

Transaction ID: 2009M04L11ai00904

Amount of Each Receipt this Period 140.00

B. Full Name (Last, First, Middle Initial)
Mr. H. Virgil Davis

Mailing Address 3901 Montecito Drive
Apartment 616

City Denton State TX Zip Code 76210-5565

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai00905

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. John S. Davis

Mailing Address 1725 Roosevelt Avenue

City Altadena State CA Zip Code 91001-3618

FEC ID number of contributing federal political committee. **C**

Name of Employer Los Angeles Juvenile Court Healthcare Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 19 / 2009

Transaction ID: 2009M04L11ai00906

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 490.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Kenneth Davis		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 1173 Oval Dr.		Transaction ID: 2009M04L11ai00907		
	City Athens	State TX	Zip Code 75751-3641	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Mr. Lonnie L. Davis		Date of Receipt MM / DD / YYYY 03 / 04 / 2009		
	Mailing Address 2061 Mc Kaig Road		Transaction ID: 2009M04L11ai00908		
	City Troy	State OH	Zip Code 45373-9418	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Troy Veterinary Clinic, Inc.	Occupation Veterinarian			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

C.	Full Name (Last, First, Middle Initial) Mr. Monty L. Davis		Date of Receipt MM / DD / YYYY 03 / 27 / 2009		
	Mailing Address 19827 Cypress Church Road		Transaction ID: 2009M04L11ai00909		
	City Cypress	State TX	Zip Code 77433-1479	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Core Lab Lp	Occupation Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00			

SUBTOTAL of Receipts This Page (optional)

1050.00

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 310 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Richard M. Davis		Date of Receipt MM / DD / YYYY 03 / 02 / 2009		
	Mailing Address 3440 Compass Rose Drive E.		Transaction ID: 2009M04L11ai00910		
	City Jacksonville	State FL	Zip Code 32216-1105	Amount of Each Receipt this Period 35.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00			

B.	Full Name (Last, First, Middle Initial) Mr. Richard M. Davis		Date of Receipt MM / DD / YYYY 03 / 12 / 2009		
	Mailing Address 3440 Compass Rose Drive E.		Transaction ID: 2009M04L11ai00911		
	City Jacksonville	State FL	Zip Code 32216-1105	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00			

C.	Full Name (Last, First, Middle Initial) Mr. Richard M. Davis		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 3440 Compass Rose Drive E.		Transaction ID: 2009M04L11ai00912		
	City Jacksonville	State FL	Zip Code 32216-1105	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00			

SUBTOTAL of Receipts This Page (optional) ▶

135.00

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 311 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Robert Carter Davis

Mailing Address 114 Cobb Road

City State Zip Code
Highlands NC 28741-9405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aga, Lic Md

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00913

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. S S Davis

Mailing Address 5320 Camino Montano NE

City State Zip Code
Albuquerque NM 87111-5726

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00914

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. William Davis

Mailing Address 1514 Kings Road

City State Zip Code
Cantonment FL 32533-8953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. Filter Distribution, Inc. Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00915

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Thomas L Davis Iii

Mailing Address 29531 Perdido Beach Blvd. #601

City State Zip Code
Orange Beach AL 36561

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation
Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai00916

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul De Cleva

Mailing Address 350 N. Saint Paul Street Suite 1625

City State Zip Code
Dallas TX 75201-6852

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation
Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00917

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul De Cleva

Mailing Address 350 N. Saint Paul Street Suite 1625

City State Zip Code
Dallas TX 75201-6852

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation
Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00918

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Paul De Cleva

Mailing Address 350 N. Saint Paul Street
Suite 1625

City State Zip Code
Dallas TX 75201-6852

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00919

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul De Cleva

Mailing Address 350 N. Saint Paul Street
Suite 1625

City State Zip Code
Dallas TX 75201-6852

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00920

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Dorian D. De Dene

Mailing Address 19086 Ash Avenue

City State Zip Code
Eastpointe MI 48021-2733

FEC ID number of contributing federal political committee. **C**

Name of Employer Three C's Landscaping Occupation Horticultrual Foreman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00921

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ▶ **660.00**

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 314 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. William E. De Feo

Mailing Address 144 Merrymount Drive

City State Zip Code
Warwick RI 02888-5545

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	9	

Transaction ID: 2009M04L11ai00922

Amount of Each Receipt this Period
230.00

B.

Full Name (Last, First, Middle Initial)
Mr. Anthony J. De Girolamo

Mailing Address 116 Cleveland Avenue N.W.
Courtyard Centre

City State Zip Code
Canton OH 44702-1744

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	9	

Transaction ID: 2009M04L11ai00923

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Barbara De Graw

Mailing Address P.O. Box 448

City State Zip Code
Julian CA 92036-0448

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	9	

Transaction ID: 2009M04L11ai00924

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ▶

880.00

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 315 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Mary De Hoog

Mailing Address 8381 Edison Avenue

City State Zip Code
Ontario CA 91762-7318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00925

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mrs. Mary De Hoog

Mailing Address 8381 Edison Avenue

City State Zip Code
Ontario CA 91762-7318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai00926

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Gerrit De Jong

Mailing Address 22250 Road 20

City State Zip Code
Tulare CA 93274-8936

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00927

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 316 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Rafael A. De Los Reyes

Mailing Address P.O. Box 141707

City State Zip Code
Coral Gables FL 33114-1707

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00928

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert De Rose

Mailing Address P.O. Box 8082

City State Zip Code
Rancho Santa Fe CA 92067-8082

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai00929

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Laine De Souza

Mailing Address PO Box 156

City State Zip Code
Wyncote PA 19095-0156

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai00930

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William S. DeArment

Mailing Address 438 Chestnut Street

City State Zip Code
Meadville PA 16335-4403

FEC ID number of contributing federal political committee. **C**

Name of Employer Channellock, Inc. Occupation Businessman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00931

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Mary DeMarteleire

Mailing Address 4013 Caln Circle

City State Zip Code
Harleysville PA 19438-3336

FEC ID number of contributing federal political committee. **C**

Name of Employer Usps Occupation Supr. Customer Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00932

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mrs. Mary DeMarteleire

Mailing Address 4013 Caln Circle

City State Zip Code
Harleysville PA 19438-3336

FEC ID number of contributing federal political committee. **C**

Name of Employer Usps Occupation Supr. Customer Services

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00933

Amount of Each Receipt this Period
200.00

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 318 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Constance J. Deakin
Mailing Address P.O. Box 45
City Moapa State NV Zip Code 89025-0045
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai00934
Amount of Each Receipt this Period 180.00

B. Full Name (Last, First, Middle Initial)
Mr. George Dean
Mailing Address 14900 1St Avenue N.E.
Apartment 207
City Shoreline State WA Zip Code 98155-6809
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai00935
Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Mr. Jack P. Dean
Mailing Address 110 Country Club Drive
City Madison State MS Zip Code 39110-8809
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai00936
Amount of Each Receipt this Period 250.00

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 319 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Russell J. & Janet S Dean

Mailing Address P.O. Box 2347

City Pasco State WA Zip Code 99302-2347

FEC ID number of contributing federal political committee. **C**

Name of Employer Russ Dean Ford, Inc. Occupation Auto & R.V. Dealer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai00937
Amount of Each Receipt this Period 360.00

B. Full Name (Last, First, Middle Initial)
Mrs. Sandra Dean

Mailing Address 3064 N. Windstone Way Lane

City Germantown State TN Zip Code 38138-7382

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai00938
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. A. Neil Deatley

Mailing Address 6523 Snake River Road

City Asotin State WA Zip Code 99402-9528

FEC ID number of contributing federal political committee. **C**

Name of Employer Eucon Corporation Occupation Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 18 / 2009
Transaction ID: 2009M04L11ai00939
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 660.00

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 320 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Virgil C. Dechant

Mailing Address 11409 Meadow Lane

City Leawood State KS Zip Code 66211-3015

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai00940
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Sophia Decleva

Mailing Address 350 North St Paul Street #1625

City Dallas State TX Zip Code 75201-4259

FEC ID number of contributing federal political committee. **C**

Name of Employer ROAD RUNNER OIL CO. Occupation OIL & GAS ADMINISTRATOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai00941
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Terence N. Deeks

Mailing Address 2843 S. Bayshore Drive Apartment 8F

City Coconut Grove State FL Zip Code 33133-6022

FEC ID number of contributing federal political committee. **C**

Name of Employer Navigation Insurance Company Occupation Insurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai00942
Amount of Each Receipt this Period 500.00

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 321 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Carla Dehmrow

Mailing Address 2500 Indigo Lane
#109

City State Zip Code
Glenview IL 60026-7799

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00943

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Russell D Deidiker, M.D.

Mailing Address 2820 Wesley Chapel Road

City State Zip Code
Farmington MO 63640-6512

FEC ID number of contributing federal political committee. **C**

Name of Employer Mineral Area Pathology, Llc Occupation Pathologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00944

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark A Delagasse

Mailing Address P.O. Box 985

City State Zip Code
Naches WA 98937-0985

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00945

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 322 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. John P. Delaney

Mailing Address 4731 Pin Oak Road

City Akron State OH Zip Code 44333-1070

FEC ID number of contributing federal political committee. **C**

Name of Employer G.D.S. Express, Inc. Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai00946

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. P. James Delaney

Mailing Address 13 Cliff Top Drive

City Loudonville State NY Zip Code 12211-1513

FEC ID number of contributing federal political committee. **C**

Name of Employer Curtis Lumber Company, Inc. Occupation Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 03 / 2009

Transaction ID: 2009M04L11ai00947

Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Mr. George B. Delaplaine, Jr.

Mailing Address 11732 Old Annapolis Road

City Frederick State MD Zip Code 21701-3430

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1700.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai00948

Amount of Each Receipt this Period 200.00

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 323 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Angelo Delgrande

Mailing Address 93 Spy Glass HL

City Hopewell Junction State NY Zip Code 12533-6273

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai00949
Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles Ray Delong

Mailing Address 3051 Hartway Drive

City Deland State FL Zip Code 32720-1900

FEC ID number of contributing federal political committee. **C**

Name of Employer Triple D. Equipment Occupation President/ Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai00950
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Donald Delong

Mailing Address 355 Ridge Road

City Newton State NJ Zip Code 07860

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai00951
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1275.00

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 324 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas F. Deloughery

Mailing Address 2401 100th St. NW

City State Zip Code
Burlington ND 58722-9501

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Contractor

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00952

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Nicholas Demmo

Mailing Address 2 Oneida Street

City State Zip Code
Rye NY 10580

FEC ID number of contributing federal political committee. **C**

Name of Employer Wachtell Lipton Rosen & Katz Occupation Lawyer

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai00953

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Dr. & Mrs. Robert S. Demski

Mailing Address 2020 Persimmon Hill Lane

City State Zip Code
Lampe MO 65681-7395

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai00954

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

1050.00

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 325 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Howard Denbo		Date of Receipt
	Mailing Address 45 Castro Street Suite 138		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	San Francisco	CA	94114-1029
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00955
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	100.00

B.	Full Name (Last, First, Middle Initial) Mr. Joe C. Denman, III		Date of Receipt
	Mailing Address 112 Suntory Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	Lufkin	TX	75901-7738
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00956
Name of Employer First Bank and Trust East Texas		Occupation Banking Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	100.00

C.	Full Name (Last, First, Middle Initial) Mr. Paul Dennis		Date of Receipt
	Mailing Address 16330 Vintage Oaks Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 04 / 2009
	City	State	Zip Code
	Delray Beach	FL	33484-6430
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai00957
Name of Employer P.S. Dennis Consultants		Occupation Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	205.00

SUBTOTAL of Receipts This Page (optional)	405.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 326 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles Derienzo

Mailing Address 19 Piper Place

City State Zip Code
Old Bethpage NY 11804-1451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N.Y.P.D. Police

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00958

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Bill Derosa

Mailing Address 11 Dellwood Avenue

City State Zip Code
Chatham NJ 07928-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Putnam Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00959

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Dr. Michael D. Derosa

Mailing Address 47301 National Road
P.O. Box 536

City State Zip Code
Saint Clairsville OH 43950-0536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai00960

Amount of Each Receipt this Period
240.00

SUBTOTAL of Receipts This Page (optional) ► 390.00

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 327 / 1945		
	<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

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Phaon B. Derr, Jr.

Mailing Address 4704 Nottingham Road

City Jacksonville State FL Zip Code 32210-5854

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai00961

Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Ms. Trudy Desilets

Mailing Address 11709 59Th Ave W. Unit 202

City Mukilteo State WA Zip Code 98275-4872

FEC ID number of contributing federal political committee. **C**

Name of Employer Medicis Occupation Chief Technology Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai00962

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Mary C. Deusenbery

Mailing Address 1 Mill Street

City Cohocton State NY Zip Code 14826-9405

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 02 / 2009

Transaction ID: 2009M04L11ai00963

Amount of Each Receipt this Period 110.00

SUBTOTAL of Receipts This Page (optional) ► 1310.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 328 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Kay Devries
Mailing Address 2338 Cleveland Avenue
City Inwood State IA Zip Code 51240-7779
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai00964
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth Dey
Mailing Address 86 Hill Road
City Allentown State NJ Zip Code 08501-1410
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 430.00
Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai00965
Amount of Each Receipt this Period 315.00

C. Full Name (Last, First, Middle Initial)
Mrs. Abigail S. Deyampert
Mailing Address 418 E. Berry St
City Ft Wayne State IN Zip Code 46802
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 535.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai00966
Amount of Each Receipt this Period 535.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 329 / 1945
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 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Tammela A Di Leo

Mailing Address 2747 NE 17th Street

City State Zip Code
Fort Lauderdale FL 33305-3603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai00967

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph L. Di Maggio

Mailing Address 527 Black Duck Lane

City State Zip Code
Bloomington IL 60108-5400

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Five Star Safety Equipment, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00968

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert J. Di Meola

Mailing Address 67 Clear Lake Road

City State Zip Code
Whiting NJ 08759-2980

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 242.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00969

Amount of Each Receipt this Period
242.00

SUBTOTAL of Receipts This Page (optional) ► **742.00**

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 330 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Orlando Di Rienzo

Mailing Address P.O. Box 49

City State Zip Code
Potterville NJ 07979-0049

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00970

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. Orlando Di Rienzo

Mailing Address P.O. Box 49

City State Zip Code
Potterville NJ 07979-0049

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai00971

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael C Di Severia

Mailing Address 16200 Bellingham Drive

City State Zip Code
Darnestown MD 20874

FEC ID number of contributing federal political committee. **C**

Name of Employer Potomac Foods Company Occupation Own/Operate Restaurants

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai00972

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 331 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joseph Diaco

Mailing Address 820 Trailing Ridge Road

City State Zip Code
Franklin Lakes NJ 07417-1515

FEC ID number of contributing federal political committee. **C**

Name of Employer
Power Electric Company, Inc.

Occupation
Electrical Contractor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00973

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Ashley Diamond

Mailing Address 401 Pea Pond Road

City State Zip Code
Katonah NY 10536-3832

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested

Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai00974

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Rosa M Diaz (Flores)

Mailing Address 9817 Sw 58 Street

City State Zip Code
Miami FL 33173-1414

FEC ID number of contributing federal political committee. **C**

Name of Employer
All American Containers, Inc.

Occupation
Svp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai00975

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 332 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lloyd Dibb
Mailing Address 3309 Route 66
City New Bethlehem State PA Zip Code 16242-4743
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai00976
Amount of Each Receipt this Period 30.00

B. Full Name (Last, First, Middle Initial)
Mr. Lloyd Dibb
Mailing Address 3309 Route 66
City New Bethlehem State PA Zip Code 16242-4743
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai00977
Amount of Each Receipt this Period 205.00

C. Full Name (Last, First, Middle Initial)
Mr. Lloyd Dibb
Mailing Address 3309 Route 66
City New Bethlehem State PA Zip Code 16242-4743
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai00978
Amount of Each Receipt this Period 40.00

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 333 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Bennie G. Dibona

Mailing Address 4305 W. Watrous Avenue

City State Zip Code
Tampa FL 33629-4916

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	0	9

Transaction ID: 2009M04L11ai00979

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Andrew Dick

Mailing Address 225 Elmcroft Rd

City State Zip Code
Rochester NY 14609-7741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Zwicker & Assoc, Pc Attorney

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	0	9

Transaction ID: 2009M04L11ai00980

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. James C. Dickert

Mailing Address 54 Huntington Court

City State Zip Code
Burr Ridge IL 60527-6451

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

Transaction ID: 2009M04L11ai00981

Amount of Each Receipt this Period
201.00

SUBTOTAL of Receipts This Page (optional) ▶

401.00

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 334 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Patrick Dickman

Mailing Address 1578 Majestic View Lane

City State Zip Code
Fleming Island FL 32003-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pegasus Technologies, Inc. Director Of Maintenance (Aviation)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00982

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Patrick Dickman

Mailing Address 1578 Majestic View Lane

City State Zip Code
Fleming Island FL 32003-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pegasus Technologies, Inc. Director Of Maintenance (Aviation)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai00983

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Everard D. Diedrick

Mailing Address 19864 Tattnall Way

City State Zip Code
Brooksville FL 34601-6476

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai00984

Amount of Each Receipt this Period
165.00

SUBTOTAL of Receipts This Page (optional) ► **465.00**

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 335 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Everard D. Diedrick

Mailing Address 19864 Tattnall Way

City State Zip Code
Brooksville FL 34601-6476

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai00985

Amount of Each Receipt this Period
165.00

B. Full Name (Last, First, Middle Initial)
Mrs. Pearl Diem

Mailing Address 217 W. Holly Avenue

City State Zip Code
Pitman NJ 08071-1333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai00986

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Norbert Diersen

Mailing Address 224 E. Main Street

City State Zip Code
Harbor Springs MI 49740-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 670.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai00987

Amount of Each Receipt this Period
310.00

SUBTOTAL of Receipts This Page (optional) ► **775.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 336 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. William C. Dietz	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 1300 N.E. 16Th Avenue Apartment 701	Transaction ID: 2009M04L11ai00988
	City State Zip Code Portland OR 97232-1483	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Gail W. Dilley	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address P.O. Box 858	Transaction ID: 2009M04L11ai00989
	City State Zip Code Mannford OK 74044-1346	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Paul Dimartini	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 345 River Bend Drive	Transaction ID: 2009M04L11ai00990
	City State Zip Code Reno NV 89523-9518	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer D. & D. Tire, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1055.00	

SUBTOTAL of Receipts This Page (optional)	1600.00
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 337 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Leslie V Dix li

Mailing Address 133 Bretton Road

City State Zip Code
Johnstown PA 15905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Drs Technologies Director, Quality & Opex

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai00991

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)

Ms. Elaine K. Dixon

Mailing Address 599 Macon Road

City State Zip Code
Mc Intyre GA 31054-2059

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Attentus Healthcare, Inc. Healthcare

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai00992

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Thomas Dixon

Mailing Address 2400 N.E. 36St
#6

City State Zip Code
Light House Point FL 33064-8171

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai00993

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶

750.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 338 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Millie Djurich

Mailing Address 17501 Buckingham Drive

City State Zip Code
Beverly Hills MI 48025-3213

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	9	

Transaction ID: 2009M04L11ai00994

Amount of Each Receipt this Period
70.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard S. Dodd

Mailing Address 1390 Gulfstar Drive S.

City State Zip Code
Naples FL 34112-6402

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	9	

Transaction ID: 2009M04L11ai00995

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard S. Dodd

Mailing Address 1390 Gulfstar Drive S.

City State Zip Code
Naples FL 34112-6402

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	9	

Transaction ID: 2009M04L11ai00996

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

220.00

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 339 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Gary Dodson

Mailing Address 763 Darlene Way

City State Zip Code
Boulder City NV 89005-3422

FEC ID number of contributing federal political committee. **C**

Name of Employer Ecc Occupation
Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00997

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Gary Dodson

Mailing Address 763 Darlene Way

City State Zip Code
Boulder City NV 89005-3422

FEC ID number of contributing federal political committee. **C**

Name of Employer Ecc Occupation
Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai00998

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Kathryn D. Dodson

Mailing Address 16940 Bay Street

City State Zip Code
Jupiter FL 33477-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai00999

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ► **310.00**

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 340 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Clara Dolan

Mailing Address 19562 Waterford Ct.

City State Zip Code
Excelsior MN 55331-7023

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01000

Amount of Each Receipt this Period
140.00

B. Full Name (Last, First, Middle Initial)
Mrs. Laine Dolan

Mailing Address P.O. Box 143

City State Zip Code
Elka Park NY 12427-0143

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01001

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Norbert L. Doligalski

Mailing Address 5819 Encore Drive

City State Zip Code
Dallas TX 75240-4761

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01002

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **940.00**

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 341 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Eric M. Donaty

Mailing Address 8920 Wilshire Blvd.
#316

City State Zip Code
Beverly Hills CA 90211-2003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Eric M. Donaty Dmd, Inc. Dentist

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai01003

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Kathy & James Donnelly

Mailing Address 724 Willow Ridge Drive

City State Zip Code
San Marcos TX 78666-4912

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01004

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Ms. Maureen Ann Donnelly

Mailing Address 1280 S. Alhambra Circle
Apartment 1425

City State Zip Code
Coral Gables FL 33146-3130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rader Logistics Business Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai01005

Amount of Each Receipt this Period
330.00

SUBTOTAL of Receipts This Page (optional) ► **1530.00**

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 342 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Mavis Donnelly	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 3170 North Bear Canyon Road	Transaction ID: 2009M04L11ai01006
	City State Zip Code Tucson AZ 85749-8772	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Mavis Donnelly	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Ms. Julia Donner	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 83 Presidents Walk	Transaction ID: 2009M04L11ai01007
	City State Zip Code Buffalo NY 14221-2426	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) Ms. Julia Donner	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 83 Presidents Walk	Transaction ID: 2009M04L11ai01008
	City State Zip Code Buffalo NY 14221-2426	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

SUBTOTAL of Receipts This Page (optional)	▶	1110.00
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 343 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John R Doody

Mailing Address 42 Cross Creek Dr. W.

City Birmingham State AL Zip Code 35213

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 27 / 2009

Transaction ID: 2009M04L11ai01009

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Peggy Dopson

Mailing Address 1617 McAllen Street

City Henderson State TX Zip Code 75654-4273

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2009

Transaction ID: 2009M04L11ai01010

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Rodgers B. Dorr, Jr.

Mailing Address P.O. Box 3824

City Redondo Beach State CA Zip Code 90277-2307

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai01011

Amount of Each Receipt this Period 500.00

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 344 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Ann Oman Dorsett

Mailing Address P.O. Box 1969

City State Zip Code
Crossville TN 38558-1969

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01012

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert Dorsey

Mailing Address 5793 Opengate Court

City State Zip Code
Cincinnati OH 45247-5982

FEC ID number of contributing federal political committee. **C**

Name of Employer Ultimus Fund Solutions Occupation Managing Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01013

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Andrew J. Dossett

Mailing Address 1305 E. Balboa Boulevard

City State Zip Code
Newport Beach CA 92661-1421

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01014

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 345 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Joyce Doty
Mailing Address P. O. Box 582
City Kilauea State HI Zip Code 96754-0582
FEC ID number of contributing federal political committee. **C**
Name of Employer Na Aina Kai Botanical Gardens Occupation Ceo
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai01015
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Bennett B. Doubleday, Jr.
Mailing Address 4406 Georgian Place
City Nashville State TN Zip Code 37215-4528
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 03 / 18 / 2009
Transaction ID: 2009M04L11ai01016
Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
Mrs. Betty J. Doughty
Mailing Address 1 W. Berwin Way
City Mount Laurel State NJ Zip Code 08054-3014
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai01017
Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 1425.00
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 346 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Betty J. Dougherty
 Mailing Address 1 W. Berwin Way
 City State Zip Code
 Mount Laurel NJ 08054-3014
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 09 / 2009
Transaction ID: 2009M04L11ai01018
 Amount of Each Receipt this Period
 75.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

B. Full Name (Last, First, Middle Initial)
Mrs. Betty J. Dougherty
 Mailing Address 1 W. Berwin Way
 City State Zip Code
 Mount Laurel NJ 08054-3014
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2009
Transaction ID: 2009M04L11ai01019
 Amount of Each Receipt this Period
 25.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

C. Full Name (Last, First, Middle Initial)
Mrs. Betty J. Dougherty
 Mailing Address 1 W. Berwin Way
 City State Zip Code
 Mount Laurel NJ 08054-3014
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2009
Transaction ID: 2009M04L11ai01020
 Amount of Each Receipt this Period
 20.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

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: PAGE 347 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Betty J. Doughty

Mailing Address 1 W. Berwin Way

City State Zip Code
Mount Laurel NJ 08054-3014

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01021

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Ralph E. Douglas

Mailing Address 20 Fenimore Drive

City State Zip Code
Scotch Plains NJ 07076-2532

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01022

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
Mrs. Connie L. Douglass

Mailing Address 1709 S. State Street

City State Zip Code
Edmond OK 73013-3633

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01023

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1130.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 348 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Tom Douglass

Mailing Address 1709 S. State Street

City State Zip Code
Edmond OK 73013-3633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Advanced Micro Solutions, Inc. Owner, president

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01024

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. William H. Douglass

Mailing Address 9845 Santa Clara Court

City State Zip Code
Howey In The Hills FL 34737-5004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
American Logistic's Company Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai01025

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ronald M. Doumani

Mailing Address 32 Quiet Moon Lane

City State Zip Code
Las Vegas NV 89135-7863

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai01026

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 349 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Chuck Downey		Date of Receipt MM / DD / YYYY 03 / 20 / 2009
Mailing Address 2822 Stinson Street		Transaction ID: 2009M04L11ai01027
City Poplar Grove	State IL	Zip Code 61065-8249
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Mr. Chuck Downey		Date of Receipt MM / DD / YYYY 03 / 27 / 2009
Mailing Address 2822 Stinson Street		Transaction ID: 2009M04L11ai01028
City Poplar Grove	State IL	Zip Code 61065-8249
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Mr. James Downey		Date of Receipt MM / DD / YYYY 03 / 20 / 2009
Mailing Address 4765 SW 80th Street		Transaction ID: 2009M04L11ai01029
City Miami	State FL	Zip Code 33143-6139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Validus Reaseguros	Occupation Reinsurance Underwriter	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
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 350 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Timothy Downey

Mailing Address 4184 Boca Pointe Drive

City State Zip Code
Sarasota FL 34238-5572

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01030

Amount of Each Receipt this Period
2250.00

B. Full Name (Last, First, Middle Initial)
Mr. Jimmy Doyle

Mailing Address P. O. Box 365

City State Zip Code
Warrior AL 35180-0365

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
Hydra Service, Inc. Admin. Assis.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01031

Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael E. Drayer

Mailing Address 3103 Cardinal Drive

City State Zip Code
Westminster MD 21157-7703

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01032

Amount of Each Receipt this Period
245.00

SUBTOTAL of Receipts This Page (optional) ► 2720.00

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 351 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Francis G. Dreiss

Mailing Address 2934 Junction Hwy.

City State Zip Code
Kerrville TX 78028-9312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai01033

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Frederick & Lolamar Dressler

Mailing Address P.O. Box 188

City State Zip Code
Gardenerville NV 89410-0188

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai01034

Amount of Each Receipt this Period
65.00

C.

Full Name (Last, First, Middle Initial)
Dr. Dale R. Drew

Mailing Address 4454 Barchester Drive

City State Zip Code
Bloomfield Hills MI 48302-2118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai01035

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)

1115.00

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 352 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. James Thomas Drew
 Mailing Address 11914 Tierra Verde Court
 City State Zip Code
 Jacksonville FL 32258-2279
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Baptist Health Jackson, FL Physician
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 02 / 2009
Transaction ID: 2009M04L11ai01036
 Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
 Ms. Laura Driscoll
 Mailing Address 15 Byrnes Street
 City State Zip Code
 Newport RI 02840-4061
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Metlife Financial Services
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 250.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 27 / 2009
Transaction ID: 2009M04L11ai01037
 Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
 Mr. W. John Driscoll
 Mailing Address 30 7Th Street E.
 Suite 2000
 City State Zip Code
 Saint Paul MN 55101-4930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 11 / 2009
Transaction ID: 2009M04L11ai01038
 Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional) ► **1750.00**
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 353 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Lois C. Drum

Mailing Address 251 Chapel Road

City State Zip Code
Wheeling WV 26003-4841

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01039

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles E. Drummey

Mailing Address 4 Benjamin Road

City State Zip Code
Ellington CT 06029-2127

FEC ID number of contributing federal political committee. **C**

Name of Employer Murtha Cullina, L.L.P. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01040

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. John M. Drury

Mailing Address 5101 New Cut Road Rear

City State Zip Code
Louisville KY 40214-2734

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01041

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional) ► **975.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 354 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John M. Drury

Mailing Address 5101 New Cut Road Rear

City State Zip Code
Louisville KY 40214-2734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01042

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Mrs. Cheri L. Druzak

Mailing Address 164 Radcliff Dr.

City State Zip Code
Aliquippa PA 15001-1678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01043

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Mr. Raymond F. Du Bois, Jr.

Mailing Address 1545 35th Street NW

City State Zip Code
Washington DC 20007-2753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01044

Amount of Each Receipt this Period
1100.00

SUBTOTAL of Receipts This Page (optional) ► **1725.00**

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 355 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Hugo DuPreez

Mailing Address 1641 Chinaberry Way

City State Zip Code
Naples FL 34105-3053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 202.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	9

Transaction ID: 2009M04L11ai01045

Amount of Each Receipt this Period

202.00

B.

Full Name (Last, First, Middle Initial)
Mr. Karl Duffy

Mailing Address 579 W. Shore Road

City State Zip Code
South Hero VT 05486-4404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	9

Transaction ID: 2009M04L11ai01046

Amount of Each Receipt this Period

110.00

C.

Full Name (Last, First, Middle Initial)
Ms. Bhagvan Dugre

Mailing Address 435 East 57th Street
Apartment 11C

City State Zip Code
New York NY 10022-3174

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sisley Cosmetics Usa Sales Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	9

Transaction ID: 2009M04L11ai01047

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

462.00

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 356 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Jerry Dumas		Date of Receipt MM / DD / YYYY 03 / 02 / 2009		
	Mailing Address 6560 Coppage Street		Transaction ID: 2009M04L11ai01048		
	City Houston	State TX	Zip Code 77007-2079	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00		
	Name of Employer Flotek Industries	Occupation C.E.O.		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Dr. John C. Dumler, Jr.		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address 445 Maryland Avenue		Transaction ID: 2009M04L11ai01049		
	City Harrisonburg	State VA	Zip Code 22801-1730	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 400.00		
	Name of Employer Requested	Occupation Requested		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Mr. James R. Dunathan		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 142 Old Vine Way		Transaction ID: 2009M04L11ai01050		
	City Napa	State CA	Zip Code 94558-7029	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 390.00		
	Name of Employer Self-Employed	Occupation Self-Employed		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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 357 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James R. Dunathan

Mailing Address 142 Old Vine Way

City Napa State CA Zip Code 94558-7029

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai01051
Amount of Each Receipt this Period: 85.00

B. Full Name (Last, First, Middle Initial)
Mr. James R. Dunathan

Mailing Address 142 Old Vine Way

City Napa State CA Zip Code 94558-7029

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai01052
Amount of Each Receipt this Period: 85.00

C. Full Name (Last, First, Middle Initial)
Cpt. John A. Duncan, USN (Ret)

Mailing Address P.O. Box 523

City Loxley State AL Zip Code 36551-0523

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai01053
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 270.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 358 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Lisa Dunderville

Mailing Address 409 Woodbridge Drive

City State Zip Code
Charleston WV 25311

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01054

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Joe Dunigan

Mailing Address 911 E. South Street

City State Zip Code
Jackson MI 49203-4404

FEC ID number of contributing federal political committee. **C**

Name of Employer Dunigan Brothers Occupation Construction

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai01055

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joseph J. Dunn

Mailing Address 300 West Elm Street
Suite 2314

City State Zip Code
Conshohocken PA 19428-1832

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai01056

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ▶

2750.00

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 359 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Patricia Dunn

Mailing Address 181 Durham Road

City State Zip Code
Newtown PA 18940-1120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Merrill Lynch Financial Advisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai01057

Amount of Each Receipt this Period
2000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Elton E. Dyal

Mailing Address 2004 W. Longhorn Drive

City State Zip Code
Chandler AZ 85286-6117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai01058

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bruce Dyer

Mailing Address P.O. Box 39

City State Zip Code
La Jolla CA 92038-0039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
General Atomics Division Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai01059

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ▶

3300.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 360 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard S. Dyer

Mailing Address 2428 Bermuda Hills Road

City Columbia State SC Zip Code 29223-6808

FEC ID number of contributing federal political committee. **C**

Name of Employer: Dick Fyer & Associates Inc.
Occupation: Toyota, Volvo, Mercedes Dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 10 / 2009
Transaction ID: 2009M04L11ai01060
 Amount of Each Receipt this Period: 400.00

B. Full Name (Last, First, Middle Initial)
Steve & Susan Dyer

Mailing Address 15871 Duquesne Circle

City Brighton State CO Zip Code 80603-3856

FEC ID number of contributing federal political committee. **C**

Name of Employer: Univair Aircraft Corporation
Occupation: C.O.B.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: 2009M04L11ai01061
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard Dyke

Mailing Address 3 Isleworth Drive

City Henderson State NV Zip Code 89052-6458

FEC ID number of contributing federal political committee. **C**

Name of Employer: Retired
Occupation: Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 05 / 2009
Transaction ID: 2009M04L11ai01062
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► **1900.00**

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 361 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Waldemar Dzierzanowski

Mailing Address 10361 Franklin Avenue

City State Zip Code
Franklin Park IL 60131-1542

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1095.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01063

Amount of Each Receipt this Period
550.00

B. Full Name (Last, First, Middle Initial)
Mr. Walter R. Eames

Mailing Address 40 Brookland Farms Road

City State Zip Code
Poughkeepsie NY 12601-5802

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01064

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. James M. Early

Mailing Address P.O. Box 821

City State Zip Code
Kent OH 44240-0017

FEC ID number of contributing federal political committee. **C**

Name of Employer Securities Security Services Occupation Police Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
215.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01065

Amount of Each Receipt this Period
195.00

SUBTOTAL of Receipts This Page (optional) ▶ **995.00**

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 362 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. James M. Early		Date of Receipt																					
	Mailing Address P.O. Box 821		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	7		2	0	0	9														
	City State Zip Code Kent OH 44240-0017		Transaction ID: 2009M04L11ai01066																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Securities Security Services Occupation: Police Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00		<table border="1"> <tr> <td colspan="10">20.00</td> </tr> </table>		20.00																				
20.00																								

B.	Full Name (Last, First, Middle Initial) Ms. Tina M. Earp		Date of Receipt																					
	Mailing Address 5301 S. Superstition Mountain Dr. Suite 104		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	1		2	0	0	9														
	City State Zip Code Gold Canyon AZ 85218-1917		Transaction ID: 2009M04L11ai01067																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>		500.00																				
500.00																								

C.	Full Name (Last, First, Middle Initial) Ms. Patti Eason		Date of Receipt																					
	Mailing Address 1303 Calais Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		3	0		2	0	0	9														
	City State Zip Code Memphis TN 38120-3210		Transaction ID: 2009M04L11ai01068																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>		300.00																				
300.00																								

SUBTOTAL of Receipts This Page (optional)	▶	820.00
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 363 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Robbi Easton
Mailing Address 1090 Mariner Drive
City State Zip Code
Key Biscayne FL 33149-2474
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai01069
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Spencer F. Eccles
Mailing Address P.O. Box 3028
City State Zip Code
Salt Lake City UT 84110-3028
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt: 03 / 10 / 2009
Transaction ID: 2009M04L11ai01070
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Mr. Ralph J. Eckert
Mailing Address 4766 Highland Park Drive
City State Zip Code
Slinger WI 53086-9441
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00
Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai01071
Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ► 3200.00
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 364 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard Eddins, Jr.
Mailing Address 16901 Dorman Drive
City Round Rock State TX Zip Code 78681-3663
FEC ID number of contributing federal political committee. **C**
Name of Employer Verizon Occupation Supervisor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai01072
Amount of Each Receipt this Period 75.00

B. Full Name (Last, First, Middle Initial)
Mr. Vello Ederma
Mailing Address 7109 Loisdale Road
City Springfield State VA Zip Code 22150-2033
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai01073
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Peggy Edgar
Mailing Address 1104 Oday Road
City Saint Martinville State LA Zip Code 70582-5916
FEC ID number of contributing federal political committee. **C**
Name of Employer Gulf Coast Marine and Ass-ociat Occupation Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai01074
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 425.00
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 365 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John R. Edgeworth

Mailing Address 9397 Midnight Pass Road
Apartment 906

City State Zip Code
Sarasota FL 34242-2953

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01075

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. John R. Edgeworth

Mailing Address 9397 Midnight Pass Road
Apartment 906

City State Zip Code
Sarasota FL 34242-2953

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai01076

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Ms. Norman V. Edmonson

Mailing Address 607 N. Chester Road

City State Zip Code
Swarthmore PA 19081-1014

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01077

Amount of Each Receipt this Period
500.00

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 366 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Chad P. Edwards

Mailing Address 4385 Taylor Hall Lane

City Adams State TN Zip Code 37010-9181

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. Army Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai01078
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. George W. Edwards

Mailing Address 17007 Hill View Ln.

City Spring State TX Zip Code 77379-4506

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai01079
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. James Nicholas Edwards

Mailing Address 3820 River Road

City Wimberley State TX Zip Code 78676-5141

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai01080
Amount of Each Receipt this Period: 500.00

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: (check only one)	PAGE 367 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Jeff M. Edwards		Date of Receipt
	Mailing Address 3722 Cove Timber Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 30 / 2009
	City	State	Zip Code
	Granbury	TX	76049-5009
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01081
Name of Employer Triencon Services, Inc.		Occupation Industrial Data Services	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 570.00	<input type="text"/> 460.00

B.	Full Name (Last, First, Middle Initial) Mr. Robert B. Egan		Date of Receipt
	Mailing Address P.O. Box 1343		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 10 / 2009
	City	State	Zip Code
	Houston	TX	77251-1343
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01082
Name of Employer Self		Occupation CPA	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 250.00	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) William & Dorothea Egan		Date of Receipt
	Mailing Address 152 Leisure World		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 06 / 2009
	City	State	Zip Code
	Mesa	AZ	85206-3111
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01083
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 315.00	<input type="text"/> 45.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 755.00
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 368 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) William & Dorothea Egan		Date of Receipt MM / DD / YYYY 03 / 24 / 2009
Mailing Address 152 Leisure World		Transaction ID: 2009M04L11ai01084
City Mesa	State AZ	Zip Code 85206-3111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

B.

Full Name (Last, First, Middle Initial) Miss Lucille J. Ehlers		Date of Receipt MM / DD / YYYY 03 / 23 / 2009
Mailing Address 10213 Orkiney Dr.		Transaction ID: 2009M04L11ai01085
City Las Vegas	State NV	Zip Code 89144-4314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.

Full Name (Last, First, Middle Initial) Dr. Robert H Ehrhart		Date of Receipt MM / DD / YYYY 03 / 13 / 2009
Mailing Address 623 Green Place		Transaction ID: 2009M04L11ai01086
City Kohler	State WI	Zip Code 53044-1405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Aurora Medical Group	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	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 369 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Clifford J. Ehrlich

Mailing Address 9710 Beman Woods Way

City Potomac State MD Zip Code 20854-5455

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai01087

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Dennis J. Ehrreich

Mailing Address 10 Hitching Post Road

City Lakeville State MA Zip Code 02347-3606

FEC ID number of contributing federal political committee. **C**

Name of Employer Ercon, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 02 / 2009

Transaction ID: 2009M04L11ai01088

Amount of Each Receipt this Period 2000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Mourad G. El-Cassabgui

Mailing Address 3202 Fm 1990

City Palestine State TX Zip Code 75801-3013

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai01089

Amount of Each Receipt this Period 375.00

SUBTOTAL of Receipts This Page (optional) ► 2875.00

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 370 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Pamela Elardi		Date of Receipt MM / DD / YYYY 03 / 13 / 2009		
	Mailing Address 809 Ville Franche St.		Transaction ID: 2009M04L11ai01090		
	City Las Vegas	State NV	Zip Code 89145-8656	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Mr. Charles J. Elder		Date of Receipt MM / DD / YYYY 03 / 13 / 2009		
	Mailing Address 12676 Lashbrook Lane W.		Transaction ID: 2009M04L11ai01091		
	City Brighton	State MI	Zip Code 48114-6004	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) Dr. Jean K. Elder		Date of Receipt MM / DD / YYYY 03 / 03 / 2009		
	Mailing Address 4644 Sawgrass Drive E.		Transaction ID: 2009M04L11ai01092		
	City Ann Arbor	State MI	Zip Code 48108-8616	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self		Occupation Consultant - Human Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 371 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Joseph H. Elkjer		Date of Receipt	
	Mailing Address 6351 Ehler Avenue S.E.		M M / D D / Y Y Y Y Y 03 / 03 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai01093
	Delano	MN	55328-8104	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Precision Lens		Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		500.00		

B.	Full Name (Last, First, Middle Initial) Mr. J. David Eller		Date of Receipt	
	Mailing Address 281 S. E. 18Th Avenue		M M / D D / Y Y Y Y Y 03 / 05 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai01094
	Deerfield Beach	FL	33441-5009	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1500.00	
Name of Employer M.W.I. Corporation		Occupation President & C. E. O.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1500.00		

C.	Full Name (Last, First, Middle Initial) Mr. Paul Ellgen		Date of Receipt	
	Mailing Address 7404 N. W. 118Th Street		M M / D D / Y Y Y Y Y 03 / 05 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai01095
	Oklahoma City	OK	73162-1509	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		400.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		400.00		

SUBTOTAL of Receipts This Page (optional)	▶	2400.00
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 372 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. John E. Elliff		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address P. O. Box 951		Transaction ID: 2009M04L11ai01096		
	City Sterling	State CO	Zip Code 80751-0951	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested		Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Mrs. Monica Elling		Date of Receipt MM / DD / YYYY 03 / 13 / 2009		
	Mailing Address 4042 Sidonia Road		Transaction ID: 2009M04L11ai01097		
	City Sharon	State TN	Zip Code 38255	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested		Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

C.	Full Name (Last, First, Middle Initial) Mrs. Monica Elling		Date of Receipt MM / DD / YYYY 03 / 31 / 2009		
	Mailing Address 4042 Sidonia Road		Transaction ID: 2009M04L11ai01098		
	City Sharon	State TN	Zip Code 38255	Amount of Each Receipt this Period 110.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested		Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00			

SUBTOTAL of Receipts This Page (optional)	▶	710.00
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 373 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Norma C. Ellington		Date of Receipt
	Mailing Address 1227 W. Barker Avenue		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Peoria	IL	61606-1705
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01099
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="110.00"/>
		<input type="text" value="220.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. J. Kelly Elliott		Date of Receipt
	Mailing Address 10830 Kinghurst Street		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77099-3415
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01100
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	

C.	Full Name (Last, First, Middle Initial) Ms. Barbara C. Ellis		Date of Receipt
	Mailing Address 3882 Burrsville Road		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Harrington	DE	19952-4627
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01101
Name of Employer N/A		Occupation Ret.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="210.00"/>
		<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="820.00"/>
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 374 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Fred Orrell Ellis

Mailing Address 6943 Nc Highway 801 S.

City Mocksville State NC Zip Code 27028-6734

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai01102

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Renee Suzanne Ellis

Mailing Address 3719 Tully Road #A

City Modesto State CA Zip Code 95356-1023

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai01103

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Ernest Ellison, II

Mailing Address 6720 Churchill Park Court

City Charlotte State NC Zip Code 28210-3480

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai01104

Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional) ▶ **770.00**

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 375 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. & Mrs. David L. Elson

Mailing Address 513 E. Plum Creek Road

City State Zip Code
Sioux Falls SD 57105-6950

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Avera Health Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01105

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Ellen Emley

Mailing Address 6871 S. Spotswood Street

City State Zip Code
Littleton CO 80120-3626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01106

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Ellen Emley

Mailing Address 6871 S. Spotswood Street

City State Zip Code
Littleton CO 80120-3626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01107

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 376 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Judith Emmitt		Date of Receipt																					
	Mailing Address PO Box 331		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	2		2	0	0	9														
	City State Zip Code Oldwick NJ 08858-0331		Transaction ID: 2009M04L11ai01108																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: None Occupation: None Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1100.00																						

B.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Francis D. Engle		Date of Receipt																					
	Mailing Address 581 Fisher Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	5		2	0	0	9														
	City State Zip Code Roseburg OR 97471-8229		Transaction ID: 2009M04L11ai01109																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Self-Employed Occupation: Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00																						

C.	Full Name (Last, First, Middle Initial) Mr. Tony Enochson		Date of Receipt																					
	Mailing Address 642 San Benito Avenue		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	9		2	0	0	9														
	City State Zip Code Menlo Park CA 94025-1936		Transaction ID: 2009M04L11ai01110																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Amgen, Inc. Occupation: Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00																						

SUBTOTAL of Receipts This Page (optional)	2200.00
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 377 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Nels H. Enquist

Mailing Address 530 N.E. 88Th Street

City State Zip Code
Seattle WA 98115-2937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Seattle Public Schools Activity Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01111

Amount of Each Receipt this Period
105.00

B. Full Name (Last, First, Middle Initial)
Mr. Nels H. Enquist

Mailing Address 530 N.E. 88Th Street

City State Zip Code
Seattle WA 98115-2937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Seattle Public Schools Activity Coordinator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01112

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Jerry B. Epstein

Mailing Address 4201 Via Marina

City State Zip Code
Marina Del Rey CA 90292-5236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01113

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1205.00

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 378 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Mark R Epstein

Mailing Address 3612 Holly Ridge Drive

City State Zip Code
Santa Rosa CA 95409-4010

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01114

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Tracy Erwin

Mailing Address 1706 Longacre Dr.

City State Zip Code
Houston TX 77055-3133

FEC ID number of contributing federal political committee. **C**

Name of Employer Amherst Securities Group Occupation Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01115

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Gregg Esakoff

Mailing Address 710 Northwoods Dr

City State Zip Code
Whitefish MT 59937-8159

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Engineering Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01116

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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 379 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Alvaro F. Espinosa

Mailing Address 3940 Sunshine Canyon Drive

City State Zip Code
Boulder CO 80302-9722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai01117

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael P. Esposito, Jr.

Mailing Address P.O. Box 8908

City State Zip Code
Longboat Key FL 34228-8908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai01118

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Ms. Frances Estabrook

Mailing Address 1898 Kenwood Road
Box 7606

City State Zip Code
Kingsport TN 37664-3130

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai01119

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 380 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Ms. Frances Estabrook		Date of Receipt MM / DD / YYYY 03 / 18 / 2009
Mailing Address 1898 Kenwood Road Box 7606		Transaction ID: 2009M04L11ai01120
City Kingsport	State TN	Zip Code 37664-3130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.

Full Name (Last, First, Middle Initial) Ms. Frances Estabrook		Date of Receipt MM / DD / YYYY 03 / 27 / 2009
Mailing Address 1898 Kenwood Road Box 7606		Transaction ID: 2009M04L11ai01121
City Kingsport	State TN	Zip Code 37664-3130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) Mrs. Harold Estes		Date of Receipt MM / DD / YYYY 03 / 02 / 2009
Mailing Address 505 Hickory Hollow Street		Transaction ID: 2009M04L11ai01122
City Lufkin	State TX	Zip Code 75904-4777
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	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 381 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. George W. Etheridge, Jr.

Mailing Address 2847 Cobblestone Drive

City State Zip Code
Palm Harbor FL 34684-1655

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Precision Orthopedic, Inc. Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01123

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Geoffrey Etherington, III

Mailing Address 165 W. 66th Street
Apt. 3C

City State Zip Code
New York NY 10023-6538

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Edwards Angell Palmer & Dodge Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01124

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Edward R. Ettner

Mailing Address 10535 Amity Street

City State Zip Code
Mason Neck VA 22079-3516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01125

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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 382 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Cliff Eubanks		Date of Receipt
	Mailing Address 540 Johnstone Drive		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Madison	MS	39110-7584
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01126
Name of Employer Entergy		Occupation General Manager-Nuclear Power Plant	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	<input type="text" value="500.00"/>

B.	Full Name (Last, First, Middle Initial) Craig F Evans		Date of Receipt
	Mailing Address 1765 N.E. 6th St		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Hermiston	OR	97838
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01127
Name of Employer A-1 Industrial Supply		Occupation Owner/President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	<input type="text" value="500.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. J. Randolph Evans		Date of Receipt
	Mailing Address 1500 Soaring Hawk Point		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Atlanta	GA	30339-5661
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01128
Name of Employer Arnall Golden & Gregory		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3500.00"/>
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 383 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
John T Evans

Mailing Address 9030 Briarwood Lane

City State Zip Code
Dallas TX 75209

FEC ID number of contributing federal political committee. **C**

Name of Employer
John T. Evans Company, In-
c. Occupation
Real Estate Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01129

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Ms. Linda Evans

Mailing Address 1500 Soaring Hawk Point

City State Zip Code
Atlanta GA 30339-5661

FEC ID number of contributing federal political committee. **C**

Name of Employer
Self-Employed Occupation
Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01130

Amount of Each Receipt this Period
2500.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Ronald Evans

Mailing Address 16286 Maple Hall Drive

City State Zip Code
Midlothian VA 23113-6384

FEC ID number of contributing federal political committee. **C**

Name of Employer
Self-Employed Occupation
Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01131

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 384 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Shirley Bracken Evans

Mailing Address 4004 Lexington Avenue

City State Zip Code
Dallas TX 75205-3823

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 1 1 / 2 0 0 9

Transaction ID: 2009M04L11ai01132

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Shirley Bracken Evans

Mailing Address 4004 Lexington Avenue

City State Zip Code
Dallas TX 75205-3823

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai01133

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Ermon Everett

Mailing Address 90 Apostolic Road

City State Zip Code
Sumrall MS 39482-4343

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai01134

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 385 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Ermon Everett

Mailing Address 90 Apostolic Road

City Sumrall State MS Zip Code 39482-4343

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai01135

Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael C. Evers

Mailing Address 26 Hillcrest Drive

City Kearney State NE Zip Code 68845-3375

FEC ID number of contributing federal political committee. **C**

Name of Employer Nebraska Fire Sprinkler Corp Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai01136

Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Fred & Vanessa Ewing

Mailing Address 6419 Arden Court

City Brentwood State TN Zip Code 37027-5660

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai01137

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 650.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 386 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Fred & Vanessa Ewing		Date of Receipt MM / DD / YYYY 03 / 25 / 2009		
	Mailing Address 6419 Arden Court		Transaction ID: 2009M04L11ai01138		
	City Brentwood	State TN	Zip Code 37027-5660	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested Occupation Manager		Aggregate Year-to-Date 500.00		

B.	Full Name (Last, First, Middle Initial) Mr. & Mrs. John B. Ewles		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 11 Madrigal		Transaction ID: 2009M04L11ai01139		
	City San Clemente	State CA	Zip Code 92673-2735	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired Occupation Retired		Aggregate Year-to-Date 1000.00		

C.	Full Name (Last, First, Middle Initial) Dr. George Eyrich		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 617 Fairfax Road		Transaction ID: 2009M04L11ai01140		
	City Mobile	State AL	Zip Code 36608-2939	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed Occupation Self-Employed		Aggregate Year-to-Date 300.00		

SUBTOTAL of Receipts This Page (optional)	▶	1550.00
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 387 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Joan H. Facey		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 245 River Landing Drive		Transaction ID: 2009M04L11ai01141		
	City Roswell	State GA	Zip Code 30075-5045	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Ms. Barbara Faga		Date of Receipt MM / DD / YYYY 03 / 19 / 2009		
	Mailing Address 3166 Juniper Lane		Transaction ID: 2009M04L11ai01142		
	City Falls Church	State VA	Zip Code 22044-1814	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Ret.	Occupation Teacher			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Mrs. Rita W. Fahrenkrug		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 8365 Indian Hill Road		Transaction ID: 2009M04L11ai01143		
	City Manlius	State NY	Zip Code 13104-8791	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer M.F.C.	Occupation Accountant			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

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 388 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James M. Fail

Mailing Address Two 20th Street North
Suite 930

City Birmingham State AL Zip Code 35203-4014

FEC ID number of contributing federal political committee. **C**

Name of Employer Stone Holdings, Inc. Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai01144
Amount of Each Receipt this Period 15000.00

B. Full Name (Last, First, Middle Initial)
Dr. S. Fairchild

Mailing Address 240 Ferry Road

City Lewiston State ME Zip Code 04240-1103

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Maine Medical Center Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai01145
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Gary Falconer

Mailing Address 7806 34Th Court East

City Sarasota State FL Zip Code 34243-2866

FEC ID number of contributing federal political committee. **C**

Name of Employer Disabled Occupation Disabled

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 19 / 2009
Transaction ID: 2009M04L11ai01146
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 15450.00

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 389 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Gary Falconer

Mailing Address 7806 34Th Court East

City State Zip Code
Sarasota FL 34243-2866

FEC ID number of contributing federal political committee. **C**

Name of Employer Disabled Occupation Disabled

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: 2009M04L11ai01147

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Nancy J. Falconer

Mailing Address 4525 S.W. Natchez Court

City State Zip Code
Tualatin OR 97062-8769

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 2009M04L11ai01148

Amount of Each Receipt this Period
225.00

C.

Full Name (Last, First, Middle Initial)
Mr. Dinesh M. Faldu

Mailing Address 283 Colwyn Terrace

City State Zip Code
West Chester PA 19380-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer Jbc Associates,inc. Occupation Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: 2009M04L11ai01149

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional)

1925.00

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 390 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Betty Falk		Date of Receipt
	Mailing Address 1152 Adair Street		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	San Marino	CA	91108-1803
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai01150
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="265.00"/>	<input type="text" value="160.00"/>

B.	Full Name (Last, First, Middle Initial) Mrs. Fran Falk		Date of Receipt
	Mailing Address 90-60 209 Street		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Queens Village	NY	11428-1063
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Total Management Corp.		Occupation Insurance Broker	Transaction ID: 2009M04L11ai01151
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="325.00"/>	<input type="text" value="50.00"/>

C.	Full Name (Last, First, Middle Initial) Mrs. Fran Falk		Date of Receipt
	Mailing Address 90-60 209 Street		<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Queens Village	NY	11428-1063
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Total Management Corp.		Occupation Insurance Broker	Transaction ID: 2009M04L11ai01152
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="325.00"/>	<input type="text" value="100.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="310.00"/>
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 391 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Howard Falkenberg	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address P.O. Box 123	Transaction ID: 2009M04L11ai01153
	City State Zip Code Austin TX 78767-0123	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Staats Falkenberg & Partners	Occupation Business Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Howard Falkenberg	Date of Receipt MM / DD / YYYY 03 / 19 / 2009
	Mailing Address P.O. Box 123	Transaction ID: 2009M04L11ai01154
	City State Zip Code Austin TX 78767-0123	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Staats Falkenberg & Partners	Occupation Business Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. John L. Fallat	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 33 Cherne Lane	Transaction ID: 2009M04L11ai01155
	City State Zip Code San Anselmo CA 94960-1318	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Self-Employed	Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 392 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Arthur Eugene Fallert

Mailing Address 23804 Avenue 184

City State Zip Code
Porterville CA 93257-9391

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01156

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Dean G. Fantini

Mailing Address 43 Fatherland Drive

City State Zip Code
Byfield MA 01922-1400

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Electrician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai01157

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael J. Fagnoli

Mailing Address 10 Tanner Woods

City State Zip Code
San Antonio TX 78248-1628

FEC ID number of contributing federal political committee. **C**

Name of Employer Mutual Of Omaha Occupation General Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai01158

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ►

550.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 393 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Jane K. Farley
Mailing Address 5 Derby Run Court
City Blythewood State SC Zip Code 29016-8362
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai01159
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. John W. Farley
Mailing Address P.O. Box 269
City Ballentine State SC Zip Code 29002-0269
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00
Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai01160
Amount of Each Receipt this Period 750.00

C. Full Name (Last, First, Middle Initial)
Mr. Ronald E. Farmer
Mailing Address 2122 Nantucket Drive #D
City Houston State TX Zip Code 77057-2906
FEC ID number of contributing federal political committee. **C**
Name of Employer Us Led, Ltd Occupation Chief Executive Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00
Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai01161
Amount of Each Receipt this Period 750.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 394 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Ross N. Farnsworth

Mailing Address 460 S. Greenfield Road
Suite 2

City State Zip Code
Mesa AZ 85206-2062

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Farnsworth Companies Real Estate Developer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai01162

Amount of Each Receipt this Period
15000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael W. Farr

Mailing Address 406 Randolph Ave.

City State Zip Code
Gridley CA 95948-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai01163

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael W. Farr

Mailing Address 406 Randolph Ave.

City State Zip Code
Gridley CA 95948-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai01164

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)

15350.00

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 395 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Scott Farrar
Mailing Address 1200 Lipscomb Street
City State Zip Code
Fort Worth TX 76104-4631
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai01165
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Dr. Scott Farrar
Mailing Address 1200 Lipscomb Street
City State Zip Code
Fort Worth TX 76104-4631
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai01166
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Mr. David C. Farrell
Mailing Address 1220 Log Cabin Lane
City State Zip Code
Saint Louis MO 63124-1529
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 03 / 17 / 2009
Transaction ID: 2009M04L11ai01167
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 396 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Richard Faulk

Mailing Address 2745 N.E. 35Th Court

City State Zip Code
Fort Lauderdale FL 33308-6334

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01168

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Mr. Edward A. Faulkner

Mailing Address 9500 Oakridge Court

City State Zip Code
Newburg MD 20664-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Ecolab Occupation Licensed M.D.A. Applicator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01169

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Norman F. Fee

Mailing Address 7209 E. Mc Donald Drive
Unit 38

City State Zip Code
Scottsdale AZ 85250-6053

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01170

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 397 / 1945
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Jan E. & David Fehrenbacher		Date of Receipt
	Mailing Address 27 Westminster Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 18 / 2009
	City	State	Zip Code
	Lincoln	IL	62656-5430
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01171
Name of Employer Walgreens		Occupation Pharmacist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 300.00

B.	Full Name (Last, First, Middle Initial) Mr. Jose Felipe		Date of Receipt
	Mailing Address 711 Seaview Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 09 / 2009
	City	State	Zip Code
	Juno Beach	FL	33408-1309
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01172
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) Mrs. Kaye M. Feller		Date of Receipt
	Mailing Address 2777 Diamond Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 02 / 2009
	City	State	Zip Code
	Camarillo	CA	93010-9117
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01173
Name of Employer Bank Of America		Occupation Risk Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 800.00
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 398 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. David F. Felsburg

Mailing Address 2902 Hampton Place Court

City State Zip Code
Plant City FL 33566-9321

FEC ID number of contributing federal political committee. **C**

Name of Employer Paloma Systems, Inc. Occupation Executive Engineer / Small Business Ow

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai01174

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Dr. David F. Felsburg

Mailing Address 2902 Hampton Place Court

City State Zip Code
Plant City FL 33566-9321

FEC ID number of contributing federal political committee. **C**

Name of Employer Paloma Systems, Inc. Occupation Executive Engineer / Small Business Ow

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai01175

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
W. Feltus

Mailing Address 815 Slaters Lane

City State Zip Code
Alexandria VA 22314-1219

FEC ID number of contributing federal political committee. **C**

Name of Employer National Media Inc Occupation Research

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai01176

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional) ▶

750.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 399 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Melody E. Ferber

Mailing Address 1454 Galaxy Dr.

City State Zip Code
Newport Beach CA 92660-4920

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01177

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr. & Mrs. John P. Ferguson

Mailing Address 629 Augusta Drive

City State Zip Code
Springfield MO 65809-1503

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01178

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Mary N. Fernandez

Mailing Address P.O. Box 4027

City State Zip Code
Bellevue WA 98009-4027

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01179

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 400 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. F. Michael Ferrante

Mailing Address 24745 Robert Guy Road

City State Zip Code
Hidden Hills CA 91302-1157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ucla Dept Of Anesthesiology Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01180

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Mary B. Ferrebee

Mailing Address 18110 Ridgewood Avenue

City State Zip Code
Lansing IL 60438-2256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01181

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Mary B. Ferrebee

Mailing Address 18110 Ridgewood Avenue

City State Zip Code
Lansing IL 60438-2256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01182

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: PAGE 401 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Ross M. Ferreri

Mailing Address 200 Fleet Avenue

City Edison State NJ Zip Code 08820-2430

FEC ID number of contributing federal political committee. **C**

Name of Employer Edison Board Of Education Occupation Clerical Adi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai01183

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Ross M. Ferreri

Mailing Address 200 Fleet Avenue

City Edison State NJ Zip Code 08820-2430

FEC ID number of contributing federal political committee. **C**

Name of Employer Edison Board Of Education Occupation Clerical Adi

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai01184

Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Ms. Joan Mc Cormack Ferrill

Mailing Address 2001 Fort Drive

City Alexandria State VA Zip Code 22307-3330

FEC ID number of contributing federal political committee. **C**

Name of Employer Strathmoore Company Occupation Treasurer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 19 / 2009

Transaction ID: 2009M04L11ai01185

Amount of Each Receipt this Period 1500.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 402 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Douglas W. Ferris

Mailing Address 40 S. Rose Road

City Memphis State TN Zip Code 38117-2902

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai01186
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Frank J. Fertiitta, Jr.

Mailing Address 10801 W. Charleston Blvd.

City Las Vegas State NV Zip Code 89135-1709

FEC ID number of contributing federal political committee. **C**

Name of Employer Fertiitta Enterprises Occupation Chairman Of The Board

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai01187
Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. John & Delores Fery

Mailing Address P.O. Box 15407

City Boise State ID Zip Code 83715-5407

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai01188
Amount of Each Receipt this Period 1125.00

SUBTOTAL of Receipts This Page (optional) ► 6375.00

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 403 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Patricia L. Fiedler

Mailing Address 3425 Valley Creek Circle

City Middleton	State WI	Zip Code 53562-1991
-------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai01189

Amount of Each Receipt this Period
220.00

B. Full Name (Last, First, Middle Initial)
Mr. Lawrence W. Field

Mailing Address 9884 Carmelita Avenue

City Beverly Hills	State CA	Zip Code 90210-3119
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N.S.B. Associates, Inc.	Occupation Real Estate
---	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai01190

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Lester D. Findley

Mailing Address 12119 Salt River Valley Lane

City Humble	State TX	Zip Code 77346-2965
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai01191

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	820.00
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 404 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Lester D. Findley

Mailing Address 12119 Salt River Valley Lane

City State Zip Code
Humble TX 77346-2965

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: 2009M04L11ai01192

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles V. Finell

Mailing Address 402 W. Carmel Valley Road

City State Zip Code
Carmel Valley CA 93924-9417

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	0	9

Transaction ID: 2009M04L11ai01193

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. William Lloyd Fink

Mailing Address P.O. Box 1849

City State Zip Code
Alamogordo NM 88311-1849

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: 2009M04L11ai01194

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 405 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Richard S. Finlayson

Mailing Address 10902 Rocky Trail

City San Antonio State TX Zip Code 78249-4133

FEC ID number of contributing federal political committee. **C**

Name of Employer Ut Health Science Ctr. Occupation Dentist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01195

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Dr. Richard S. Finlayson

Mailing Address 10902 Rocky Trail

City San Antonio State TX Zip Code 78249-4133

FEC ID number of contributing federal political committee. **C**

Name of Employer Ut Health Science Ctr. Occupation Dentist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01196

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Jerry Finsterwald

Mailing Address 12787 Barnett Drive

City Mount Airy State MD Zip Code 21771-6140

FEC ID number of contributing federal political committee. **C**

Name of Employer Lorch Corporation Occupation Systems Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01197

Amount of Each Receipt this Period
200.00

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 406 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Bernard Fioravanti

Mailing Address 1510 W. 90th St. N

City State Zip Code
Wagoner OK 74467-8159

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai01198

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
Mr. Daniel Fishback

Mailing Address 76 Adam Way

City State Zip Code
Atherton CA 94027-3902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Demandtect C.E.O./President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01199

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Patricia L. Fisher

Mailing Address 10031 N.E. 20Th Avenue

City State Zip Code
Chiefland FL 32626-2930

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai01200

Amount of Each Receipt this Period
300.00

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 407 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Shirley M. Fisher

Mailing Address 3171 W. Pasa Tiempo Avenue

City State Zip Code
Fresno CA 93711-0242

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01201

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Walter W. Fisher

Mailing Address 355 Pine Ridge Drive

City State Zip Code
Bloomfield Hills MI 48083

FEC ID number of contributing federal political committee. **C**

Name of Employer Nub's Nob Inc Occupation Ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01202

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Laurel Fitzgerald

Mailing Address 7131 Valburn Drive

City State Zip Code
Austin TX 78731-1432

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01203

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 408 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
William & Theresa Fitzgerald

Mailing Address 7610 Misty Woods Court

City Morrow State OH Zip Code 45152-1608

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai01204

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
William & Theresa Fitzgerald

Mailing Address 7610 Misty Woods Court

City Morrow State OH Zip Code 45152-1608

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai01205

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Benjamin Fitzpatrick

Mailing Address P.O. Box 817

City Niwot State CO Zip Code 80544-0817

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2009

Transaction ID: 2009M04L11ai01206

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **350.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 409 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. James D. Fitzpatrick

Mailing Address 110 W. Fayette Street
Bond Law Firm

City State Zip Code
Syracuse NY 13202-1324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bond Schoeneck & King Lawyer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01207

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas Flaherty

Mailing Address 189 Apache Way

City State Zip Code
Tewksbury MA 01876-4519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai01208

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Thomas Flaherty

Mailing Address 189 Apache Way

City State Zip Code
Tewksbury MA 01876-4519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai01209

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

260.00

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 410 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Terrence D. Flanagan

Mailing Address 3166 Ariana Drive

City State Zip Code
Oakton VA 22124-1847

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Abbott Medical

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01210

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mr. James Flaum

Mailing Address P.O. Box 3117

City State Zip Code
Vail CO 81658-3117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01211

Amount of Each Receipt this Period
375.00

C. Full Name (Last, First, Middle Initial)
Ms. Maryann Flego

Mailing Address 23 Collura Lane

City State Zip Code
Clifton NJ 07012-1660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Advogent Client Service Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01212

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **625.00**

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 411 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Edward Fleming	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 3015 Aqua Vista Lane Apartment 121	Transaction ID: 2009M04L11ai01213
	City State Zip Code Saint Augustine FL 32084-1262	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00	

B.	Full Name (Last, First, Middle Initial) Dr. Edward Fleming	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 3015 Aqua Vista Lane Apartment 121	Transaction ID: 2009M04L11ai01214
	City State Zip Code Saint Augustine FL 32084-1262	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 900.00	

C.	Full Name (Last, First, Middle Initial) Mr. Lewis M. Fleming	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 702 W. Main Street	Transaction ID: 2009M04L11ai01215
	City State Zip Code Honey Grove TX 75446-1509	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	205.00
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 412 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Peter D. Fleming

Mailing Address 1022 Route 211 W.

City State Zip Code
Middletown NY 10940-7637

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01216

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Peter D. Fleming

Mailing Address 1022 Route 211 W.

City State Zip Code
Middletown NY 10940-7637

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01217

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Darryl L. Flinn

Mailing Address 7997 Surbey Avenue N.W.

City State Zip Code
North Canton OH 44720-8351

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01218

Amount of Each Receipt this Period
250.00

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 413 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Debra S. Flinger

Mailing Address 516 Old Farm Road

City State Zip Code
Pittsburgh PA 15234-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Tristate Capital Bank Occupation Banking

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01219

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Debra S. Flinger

Mailing Address 516 Old Farm Road

City State Zip Code
Pittsburgh PA 15234-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Tristate Capital Bank Occupation Banking

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01220

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Norris E. Flodine

Mailing Address 180 Country Grace S.

City State Zip Code
New Braunfels TX 78130-8959

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01221

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **225.00**

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 414 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Cheryl L Flohr		Date of Receipt
	Mailing Address 4208 Morning Star Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Castle Rock	CO	80108-9022
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01222
Name of Employer Requested		Occupation Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 1000.00	<input type="text"/> 1000.00

B.	Full Name (Last, First, Middle Initial) Mr. Mark B. Florian		Date of Receipt
	Mailing Address 378 Brookside Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Darien	CT	06820-2205
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01223
Name of Employer First Reserve Consolation		Occupation Investment Professional	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 250.00	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) Mr. James Flowers		Date of Receipt
	Mailing Address 138 Club Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Enterprise	AL	36330-8312
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01224
Name of Employer James E Flowers Md Pc		Occupation Anesthesiologist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 375.00	<input type="text"/> 375.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1625.00
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 415 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. John Floyd
 Mailing Address 21 Lemon Hill Drive
 City Oroville State CA Zip Code 95966-3708
 Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai01225
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self/Retired Occupation General Surgeon
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 300.00

B. Full Name (Last, First, Middle Initial)
Dr. John Floyd
 Mailing Address 21 Lemon Hill Drive
 City Oroville State CA Zip Code 95966-3708
 Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai01226
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self/Retired Occupation General Surgeon
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth A. Floyd
 Mailing Address 52 Thunder Ridge
 City Boerne State TX Zip Code 78006-8106
 Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai01227
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Self-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 250.00

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 416 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. James T. Flythe

Mailing Address 4741 Windcross Drive

City	State	Zip Code
Raleigh	NC	27614-8719

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01228

Amount of Each Receipt this Period
225.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Mary Fogel

Mailing Address 312 Lake Shore Drive

City	State	Zip Code
Lindenhurst	IL	60046-8834

FEC ID number of contributing federal political committee. **C**

Name of Employer Fogel Consulting	Occupation Healthcare Consultant

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai01229

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Claris Fogle

Mailing Address 135 Darby Street

City	State	Zip Code
Crescent City	CA	95531-9168

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai01230

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶

975.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 417 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Neil Fogle		Date of Receipt MM / DD / YYYY 03 / 03 / 2009
Mailing Address 17219 Glen Oaks Dr		Transaction ID: 2009M04L11ai01231
City Conroe	State TX	Zip Code 77385-4631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Water Utility	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Ms Blair Fontenot		Date of Receipt MM / DD / YYYY 03 / 23 / 2009
Mailing Address 1350 West Gum St.		Transaction ID: 2009M04L11ai01232
City Eunice	State LA	Zip Code 70535-4316
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Delta Drilling Products & Ser.	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Mr. Terry L. Footer		Date of Receipt MM / DD / YYYY 03 / 02 / 2009
Mailing Address P.O. Box 1713		Transaction ID: 2009M04L11ai01233
City Rancho Santa Fe	State CA	Zip Code 92067-1713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
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 418 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lynn Forbes

Mailing Address 14800 I.L. Highway 49

City Brocton State IL Zip Code 61917

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai01234
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Dr. & Mrs. William Forbes

Mailing Address P.O. Box 309

City Evans Mills State NY Zip Code 13637-0309

FEC ID number of contributing federal political committee. **C**

Name of Employer Hospice of Jefferson Co. Occupation Thanatologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai01235
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Dennis A. Forchione

Mailing Address 1 Corporation Center

City Cleveland State OH Zip Code 44147-3265

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 05 / 2009
Transaction ID: 2009M04L11ai01236
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 419 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Dennis A. Forchione

Mailing Address 1 Corporation Center

City Cleveland State OH Zip Code 44147-3265

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai01237
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Allen H. Ford

Mailing Address 1890 East 107th Street
Apartment 905

City Cleveland State OH Zip Code 44106-2252

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai01238
Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles H. Ford

Mailing Address 38 Duxbury Road

City Newton Centre State MA Zip Code 02459-2516

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai01239
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 5600.00

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 420 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Frank H. Ford, Jr.		Date of Receipt MM / DD / YYYY 03 / 03 / 2009		
	Mailing Address 1015 Ontario Street		Transaction ID: 2009M04L11ai01240		
	City Shreveport	State LA	Zip Code 71106-1411	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00		
	Name of Employer Self-Employed		Occupation Self-Employed		

B.	Full Name (Last, First, Middle Initial) Mr. James S. Ford		Date of Receipt MM / DD / YYYY 03 / 11 / 2009		
	Mailing Address 5585 Center Street Tara H. Ford		Transaction ID: 2009M04L11ai01241		
	City Jupiter	State FL	Zip Code 33458-3941	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 300.00		
	Name of Employer Palm Beach Cast Stone, Inc.		Occupation Self-Employed		

C.	Full Name (Last, First, Middle Initial) Ms. Linda Knickerbocker Ford		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address 3050 Ivy Road		Transaction ID: 2009M04L11ai01242		
	City Charlottesville	State VA	Zip Code 22903-9302	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00		
	Name of Employer Retired		Occupation Retired		

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: (check only one)	PAGE 421 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Tim P. Ford		Date of Receipt
	Mailing Address S.K.17A.A. Lake Cherokee		<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Henderson	TX	75652
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01243
Name of Employer Monsanto Company		Occupation Sales Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="150.00"/>
		<input type="text" value="225.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. Tim P. Ford		Date of Receipt
	Mailing Address S.K.17A.A. Lake Cherokee		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Henderson	TX	75652
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01244
Name of Employer Monsanto Company		Occupation Sales Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="75.00"/>
		<input type="text" value="225.00"/>	

C.	Full Name (Last, First, Middle Initial) Dr. Jane A. Fore		Date of Receipt
	Mailing Address 2941 Dove Place		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Clarkston	WA	99403-1461
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01245
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="475.00"/>
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 422 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Milton Fore

Mailing Address 7440 E. 46Th Place

City State Zip Code
Tulsa OK 74145-6306

FEC ID number of contributing federal political committee. **C**

Name of Employer Flow-Quip, Inc. Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01246

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Stephen B Forsey

Mailing Address 3650 S. Yosemite St. Suite 408

City State Zip Code
Denver CO 80237-1838

FEC ID number of contributing federal political committee. **C**

Name of Employer Sales Management Group, Inc. Occupation Small Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01247

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Dr. Mike S. Fortney

Mailing Address 6309 Serene Circle

City State Zip Code
Bismarck ND 58503-9196

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Dakota Radiologists Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 495.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01248

Amount of Each Receipt this Period
495.00

SUBTOTAL of Receipts This Page (optional) ► **845.00**

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 423 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ronald Foss

Mailing Address 5108 Phoenix East Court

City State Zip Code
Fair Oaks CA 95628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. Army Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01249

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Jeanette Fossati

Mailing Address 121 E. Hudson Avenue

City State Zip Code
Englewood NJ 07631-1940

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01250

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. James B. Fossett

Mailing Address 1579 Van Buren Road

City State Zip Code
Barnesville GA 30204-3141

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01251

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 424 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Carl Foster

Mailing Address 9153 N.W. Fullner Court

City State Zip Code
Portland OR 97229-8465

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01252

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul L. Foster

Mailing Address 123 W. Mills

City State Zip Code
El Paso TX 79901

FEC ID number of contributing federal political committee. **C**

Name of Employer Western Refining Company Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01253

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. William & Cindy Foster

Mailing Address P.O. Box 301

City State Zip Code
East Helena MT 59635-0301

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01254

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **2305.00**

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 425 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Susan L. Fotiadis

Mailing Address 4106 7Th Street

City State Zip Code
East Moline IL 61244-3511

FEC ID number of contributing federal political committee. **C**

Name of Employer Specialty Hospital Occupation Registered Nurse

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt / /
Transaction ID: 2009M04L11ai01255
 Amount of Each Receipt this Period 40.00

B. Full Name (Last, First, Middle Initial)
Mr. James B. Foulk

Mailing Address 3643 Harmony Church Road

City State Zip Code
Havre De Grace MD 21078-1015

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt / /
Transaction ID: 2009M04L11ai01256
 Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Vivian G. Fountain

Mailing Address 10675 Bellagio Road

City State Zip Code
Los Angeles CA 90077-3728

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt / /
Transaction ID: 2009M04L11ai01257
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ►

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 426 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Kevin Fournier		Date of Receipt MM / DD / YYYY 03 / 27 / 2009		
	Mailing Address 6684 E Cactus Wren Rd		Transaction ID: 2009M04L11ai01258		
	City Paradise Valley	State AZ	Zip Code 85253-4357	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Freelife International	Occupation President & Cofounder			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Mr. Billy D. Fouty		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 8533 E. Boxthorn Street		Transaction ID: 2009M04L11ai01259		
	City Wichita	State KS	Zip Code 67226-1909	Amount of Each Receipt this Period 145.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.00			

C.	Full Name (Last, First, Middle Initial) Mrs. Beth Fox		Date of Receipt MM / DD / YYYY 03 / 02 / 2009		
	Mailing Address P.O. Box 608		Transaction ID: 2009M04L11ai01260		
	City Stevensville	State MT	Zip Code 59870-0608	Amount of Each Receipt this Period 220.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested	Occupation Requested			
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)	665.00
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 427 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Sean Foy		Date of Receipt MM / DD / YYYY 03 / 20 / 2009	
Mailing Address 125 Inland Lane North 615 1st Avenue NE		Transaction ID: 2009M04L11ai01261	
City Minneapolis	State MN	Zip Code 55447-3596	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Linnihan Foy Advertising	Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

B.

Full Name (Last, First, Middle Initial) Mrs. Janelle Francis		Date of Receipt MM / DD / YYYY 03 / 18 / 2009	
Mailing Address P.O. Box 19889		Transaction ID: 2009M04L11ai01262	
City Houston	State TX	Zip Code 77224-9889	Amount of Each Receipt this Period 750.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

C.

Full Name (Last, First, Middle Initial) Ms. Tammy M. Francis		Date of Receipt MM / DD / YYYY 03 / 09 / 2009	
Mailing Address P.O. Box 754		Transaction ID: 2009M04L11ai01263	
City Newport	State TN	Zip Code 37822-0754	Amount of Each Receipt this Period 245.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00		

SUBTOTAL of Receipts This Page (optional)	▶	1245.00
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 428 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. George C. Francisco, III

Mailing Address 2210 Avalon Place

City State Zip Code
Houston TX 77019-6408

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01264

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Dr. Thomas J. Francomano

Mailing Address 254 Church Street
Suite 1

City State Zip Code
Saratoga Springs NY 12866-1076

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01265

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. George Frank

Mailing Address P.O. Box 20878

City State Zip Code
Billings MT 59104-0878

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01266

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ► **720.00**

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 429 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Major Gene Joseph P. Franklin

Mailing Address 1559 22Nd Street N.

City State Zip Code
Arlington VA 22209-1131

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
F. Electronics, Inc. Chief Executive Of Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01267

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Ms. Martha C. Fransson

Mailing Address 11 Dodge Drive

City State Zip Code
West Hartford CT 06107-1009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01268

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Martha C. Fransson

Mailing Address 11 Dodge Drive

City State Zip Code
West Hartford CT 06107-1009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01269

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 430 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. John P. Franz

Mailing Address 6303 Brocketts Crossing

City State Zip Code
Alexandria VA 22315-3551

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 18 / 2009

Transaction ID: 2009M04L11ai01270

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Ronald Frazier

Mailing Address 4114 State Highway 206

City State Zip Code
Bainbridge NY 13733-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01271

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ronald Frazier

Mailing Address 4114 State Highway 206

City State Zip Code
Bainbridge NY 13733-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01272

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 431 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Elizabeth Fredette

Mailing Address 305 Forliview Road

City State Zip Code
Glenshaw PA 15116-1823

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai01273

Amount of Each Receipt this Period
220.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Elizabeth Freeland

Mailing Address 1785 Wisteria Drive

City State Zip Code
Chambersburg PA 17202-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 505.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01274

Amount of Each Receipt this Period
5.00

C.

Full Name (Last, First, Middle Initial)
Mr. Andrew Freeman

Mailing Address 4600 Chevy Chase Blvd.

City State Zip Code
Chevy Chase MD 20815-5301

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 520.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01275

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

525.00

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 432 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Andrew Freeman

Mailing Address 4600 Chevy Chase Blvd.

City State Zip Code
Chevy Chase MD 20815-5301

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 520.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01276

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
Dr. Charles Freeman

Mailing Address P.O. Box 320

City State Zip Code
Crystal City MO 63019-0320

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01277

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Freeman

Mailing Address 5015 Fairways Circle
Apartment 207

City State Zip Code
Vero Beach FL 32967-1842

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01278

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **660.00**

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 433 / 1945
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Peter French		Date of Receipt
	Mailing Address 95 America Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 11 / 2009
	City	State	Zip Code
	Jamestown	RI	02835-1804
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01279
Name of Employer Requested		Occupation Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

B.	Full Name (Last, First, Middle Initial) Mr. Robert P.L. Frick		Date of Receipt
	Mailing Address 2141 Huntington Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 10 / 2009
	City	State	Zip Code
	Bethlehem	PA	18017-4936
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01280
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) Dr. Leon Frid		Date of Receipt
	Mailing Address 17603 Woods Edge Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 02 / 2009
	City	State	Zip Code
	Dallas	TX	75287-7547
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01281
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 220.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 770.00
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 434 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Jeanmarie N. Friebus
 Mailing Address 143 Timbercreek Drive E.
 City Yorkville State IL Zip Code 60560-9426
 Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai01282
 Amount of Each Receipt this Period 225.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Homemaker Occupation Homemaker
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Herbert Friedman
 Mailing Address 364 W. 4Th Street
 City Chillicothe State OH Zip Code 45601-3040
 Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai01283
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Rayenell Friend
 Mailing Address 248 Collett Road
 City Waynesville State OH Zip Code 45068-9306
 Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai01284
 Amount of Each Receipt this Period 300.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional) ► 775.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 435 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. William L. Friend

Mailing Address 1311 Ballantrae Farm Drive

City State Zip Code
McLean VA 22101-3028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bechtel Chemical Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai01285

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Charles G. Frink

Mailing Address 15816 Echo Hill Drive

City State Zip Code
Fountain Hills AZ 85268-3906

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: 2009M04L11ai01286

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)
Mr. Mike Frisbie

Mailing Address 7793 East Highway #4

City State Zip Code
Gypsum KS 67448

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Frisbie Construction Company, Inc. President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 1 / 2 0 0 9

Transaction ID: 2009M04L11ai01287

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

2850.00

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 436 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mrs. E. Eilline Fritzberg

Mailing Address Po Ox 257

City State Zip Code
Boardman OR 97818

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai01288

Amount of Each Receipt this Period
2300.00

B. Full Name (Last, First, Middle Initial)
 Mr. & Mrs. Harold & Sandra Fromm

Mailing Address 314 N. Berry Pine Road

City State Zip Code
Rapid City SD 57702-1859

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai01289

Amount of Each Receipt this Period
550.00

C. Full Name (Last, First, Middle Initial)
 Mrs. Marguerite Froscher

Mailing Address 3892 Wilder Blvd.

City State Zip Code
Fernandina Beach FL 32034-7350

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai01290

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **3850.00**

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 437 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Daniel Marcusq Frost		Date of Receipt MM / DD / YYYY 03 / 03 / 2009		
	Mailing Address P.O. Box 271 Frost Crushed Stone Co Inc		Transaction ID: 2009M04L11ai01291		
	City Mexia	State TX	Zip Code 76667-0271	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Frost Crushed Stone G. In- c.		Occupation Rock Crushing		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Mrs. Julia Fry		Date of Receipt MM / DD / YYYY 03 / 27 / 2009		
	Mailing Address 998 21 1/2 Road		Transaction ID: 2009M04L11ai01292		
	City Grand Junction	State CO	Zip Code 81505-9302	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

C.	Full Name (Last, First, Middle Initial) Mr. Henry C. Fucik		Date of Receipt MM / DD / YYYY 03 / 05 / 2009		
	Mailing Address 8290 S.W. 58Th Street		Transaction ID: 2009M04L11ai01293		
	City Miami	State FL	Zip Code 33143-1502	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

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 438 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Henry C. Fucik
Mailing Address 8290 S.W. 58Th Street
City Miami State FL Zip Code 33143-1502
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai01294
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Gary Fulk
Mailing Address P.O. Box 669
City Jamestown State NC Zip Code 27282-0669
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai01295
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Ralph S. Fulk
Mailing Address 5525 Adamstown Rd.
City Adamstown State MD Zip Code 21710-9620
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 03 / 05 / 2009
Transaction ID: 2009M04L11ai01296
Amount of Each Receipt this Period 50.00

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 439 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Stefanie Fuller

Mailing Address 8752 Pine Barrens Dr

City State Zip Code
Orlando FL 32817-1333

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01297

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Tommy Lynn Fulton

Mailing Address 3103 W. Oakellar Avenue

City State Zip Code
Tampa FL 33611-2917

FEC ID number of contributing federal political committee. **C**

Name of Employer The Group Occupation Civil Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01298

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. James Funk

Mailing Address P.O. Box 98

City State Zip Code
Sewickley PA 15143-0098

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01299

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 440 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert M. Furek

Mailing Address 1370 Cutler Court

City State Zip Code
Marco Island FL 34145-5841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai01300

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
John Fust, Jr.

Mailing Address 40221 Featherbed Lane

City State Zip Code
Lovettsville VA 20180-3528

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Us Army Colonel Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01301

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. John Anthony Gable

Mailing Address 320 W Illinois St #611

City State Zip Code
Chicago IL 60654-7823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lee Hecht Harrison Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai01302

Amount of Each Receipt this Period
500.00

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 441 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David A. Galliher

Mailing Address P.O. Box 514

City State Zip Code
Boca Grande FL 33921-0514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01303

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Glen Galloway

Mailing Address 744 N. Oaklawn Avenue

City State Zip Code
Elmhurst IL 60126-1406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01304

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. John F. Gamba

Mailing Address 6518 Highcroft Drive

City State Zip Code
Naples FL 34119-8420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ret. Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01305

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 442 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. John F. Gamba

Mailing Address 6518 Highcroft Drive

City State Zip Code
Naples FL 34119-8420

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai01306

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Edward A. Gamble

Mailing Address 6090 Leeds Manor Road

City State Zip Code
Hume VA 22639-1913

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01307

Amount of Each Receipt this Period
375.00

C.

Full Name (Last, First, Middle Initial)
Mr. Matthew M. Gambs

Mailing Address 2537 Sutton Lane

City State Zip Code
Aurora IL 60502-9461

FEC ID number of contributing federal political committee. **C**

Name of Employer Bloomingdale Bank & Trust Occupation Banker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai01308

Amount of Each Receipt this Period
200.00

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 443 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Tom Gammon	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 3100 Mcpherson Rd	Transaction ID: 2009M04L11ai01309
	City State Zip Code Roswell GA 30075	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Americom Broker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. William D. Gander	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 5240 S.E. 82Nd Avenue	Transaction ID: 2009M04L11ai01310
	City State Zip Code Portland OR 97266-4804	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert T. Gannett	Date of Receipt MM / DD / YYYY 03 / 13 / 2009
	Mailing Address P.O. Box 517	Transaction ID: 2009M04L11ai01311
	City State Zip Code Brattleboro VT 05302-0517	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
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 444 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Nelda Gant	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 2766 Quail Hollow Road W.	Transaction ID: 2009M04L11ai01312
	City State Zip Code Clearwater FL 33761-3216	Amount of Each Receipt this Period 55.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Ms. Nelda Gant	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 2766 Quail Hollow Road W.	Transaction ID: 2009M04L11ai01313
	City State Zip Code Clearwater FL 33761-3216	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Dale Garaux	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address Cmr 402 Box 84	Transaction ID: 2009M04L11ai01314
	City State Zip Code Apo AE 09180-0084	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Us Army Pacs Administrator Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	265.00
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 445 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. John M. Garber	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 1514 Augusta Drive	Transaction ID: 2009M04L11ai01315
	City State Zip Code Ada OK 74820-8575	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Gregory Garcia	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 13405 Walnutwood	Transaction ID: 2009M04L11ai01316
	City State Zip Code Germantown MD 20874-1025	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Wrair	Occupation Research Scientist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Howard W. Gardner	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address P.O. Box 217	Transaction ID: 2009M04L11ai01317
	City State Zip Code Cutten CA 95534-0217	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2100.00
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 446 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Dr. James Richard Gardner
 Mailing Address P.O. Box 765

City Boalsburg State PA Zip Code 16827-0765

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai01318
 Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
 Mr. Ralph D Gardner
 Mailing Address 5410 Heyward Square Place

City Marietta State GA Zip Code 30068

FEC ID number of contributing federal political committee. **C**

Name of Employer Gardner Metal System Inc. Occupation Co-Owner & Vp Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai01319
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
 Mrs. Beth Ann Garner
 Mailing Address 14914 Almondell Drive

City Huntersville State NC Zip Code 28078-2223

FEC ID number of contributing federal political committee. **C**

Name of Employer Meck Co. Health Dept. Occupation Public Health Nurse

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: 2009M04L11ai01320
 Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) ► **1425.00**

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 447 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Beth Ann Garner

Mailing Address 14914 Almondell Drive

City State Zip Code
Huntersville NC 28078-2223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Meck Co. Health Dept. Public Health Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01321

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Mr. Phil Garnto

Mailing Address 413 Hillcrest Drive

City State Zip Code
Waterloo IL 62298-1713

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01322

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Dave Garside

Mailing Address 6485 Bybee Drive

City State Zip Code
Ogden UT 84403-5489

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Jefco Inc. Sales/Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01323

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **625.00**

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 448 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert W. Garthwait, Sr.

Mailing Address P.O. Box 1367

City State Zip Code
Waterbury CT 06721-1367

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 03 / 2009**

Transaction ID: 2009M04L11ai01324

Amount of Each Receipt this Period **500.00**

B. Full Name (Last, First, Middle Initial)
Ms. Mary Garvens

Mailing Address 2167 South 80Th Street
Apartment 2

City State Zip Code
Milwaukee WI 53219-1067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aurora Health Care Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 06 / 2009**

Transaction ID: 2009M04L11ai01325

Amount of Each Receipt this Period **50.00**

C. Full Name (Last, First, Middle Initial)
Ms. Mary Garvens

Mailing Address 2167 South 80Th Street
Apartment 2

City State Zip Code
Milwaukee WI 53219-1067

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aurora Health Care Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 23 / 2009**

Transaction ID: 2009M04L11ai01326

Amount of Each Receipt this Period **50.00**

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 449 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Paula S. Gates

Mailing Address 8456 Stockton Place

City State Zip Code
Germantown TN 38139-4327

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Southern Land Company Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01327

Amount of Each Receipt this Period
330.00

B. Full Name (Last, First, Middle Initial)
Mr. Russell D. Gates

Mailing Address 606 Prospect Avenue

City State Zip Code
Oakland CA 94610-3719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Metalco Anodizer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01328

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Lee Gatzke

Mailing Address R.R. 1 Box 9-A

City State Zip Code
Tulare SD 57476

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01329

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1080.00**

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 450 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. J. Patrick Gavaghan	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 2530 Glenwood Avenue	Transaction ID: 2009M04L11ai01330
	City State Zip Code Raleigh NC 27608-1002	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Keystone Corporation Real Estate Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Donald L. Gavello	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 695 Towne Street	Transaction ID: 2009M04L11ai01331
	City State Zip Code Grants Pass OR 97527-5655	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Kevin Gavin	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 2780 Shannon Road	Transaction ID: 2009M04L11ai01332
	City State Zip Code Northbrook IL 60062-4443	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Prt Marketing	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1650.00
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 451 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frederick W. Geissinger

Mailing Address 601 N.W. 2Nd Street

City State Zip Code
Evansville IN 47708-1013

FEC ID number of contributing federal political committee. **C**

Name of Employer American General Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01333

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Paul H. Geithner

Mailing Address 4290 Highlands Bridge Road

City State Zip Code
Sarasota FL 34235-6862

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01334

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Paul H. Geithner

Mailing Address 4290 Highlands Bridge Road

City State Zip Code
Sarasota FL 34235-6862

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01335

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional) ► **335.00**

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 452 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Harvey Gelman

Mailing Address 150 38Th B. Union Turnpike
Apartment 4-0

City Flushing State NY Zip Code 11367

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai01336
Amount of Each Receipt this Period: 220.00

B. Full Name (Last, First, Middle Initial)
Dr. & Mrs. Kenneth M. Gelman

Mailing Address 3745 N.W. 89Th Terrace

City Hollywood State FL Zip Code 33024-8723

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai01337
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Mark Gengozian

Mailing Address 3292 S. Forest Street

City Denver State CO Zip Code 80222-7554

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai01338
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 770.00

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 453 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Ralph P. Genovese		Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 2085 Cornell Avenue		Transaction ID: 2009M04L11ai01339
	City Melrose Park	State IL	Zip Code 60160-1002
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 450.00
	Name of Employer Lake Book Manufacturing, Inc. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Requested Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Corey Genteel		Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 1359 Ridge Road		Transaction ID: 2009M04L11ai01340
	City Bangor	State PA	Zip Code 18013-5426
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
	Name of Employer Pocono Emergency Physicians Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Physician Assistant Aggregate Year-to-Date ▼ 260.00	

C.	Full Name (Last, First, Middle Initial) Mr. H. Alfred George		Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 4337 Valleyside Drive N.E.		Transaction ID: 2009M04L11ai01341
	City Grand Rapids	State MI	Zip Code 49525-9688
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)

680.00

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 454 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Ipe George

Mailing Address 75 Golf Lane

City Ridgefield State CT Zip Code 06877-4818

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai01342

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Jason Geralds

Mailing Address 468 Upton Rd.

City Upton State KY Zip Code 42784-9720

FEC ID number of contributing federal political committee. **C**

Name of Employer Csx Transportation Occupation Signal Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai01343

Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
Mr. C. H. Coster Gerard

Mailing Address 515 Madison Avenue
Floor 32

City New York State NY Zip Code 10022-5417

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai01344

Amount of Each Receipt this Period 750.00

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 455 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Milton F. Gerber

Mailing Address 25331 E. 2600Th Street

City State Zip Code
Prophetstown IL 61277-8892

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01345

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms Ivan Gerhath

Mailing Address P.O. Box 3640

City State Zip Code
Los Altos CA 94024-0640

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01346

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Roger Getz

Mailing Address 8 Snyder Hill Road

City State Zip Code
Lititz PA 17543-8935

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01347

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 1400.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 456 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Fred J. Giaconia

Mailing Address 754 Silk Oak Drive

City State Zip Code
Venice FL 34293-7281

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01348

Amount of Each Receipt this Period
220.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles H. Gibbons

Mailing Address 2383 Carolina Court

City State Zip Code
Mobile AL 36695-4944

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01349

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Hallie H. Gibbs

Mailing Address 617 S. Eagle Trace

City State Zip Code
Jefferson City MO 65109-4535

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01350

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1320.00**

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 457 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William I. Gibbs

Mailing Address 5850 N. Five Mile Road
Apartment 152

City Boise State ID Zip Code 83713-3763

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai01351
Amount of Each Receipt this Period 120.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Donald H. Gibson

Mailing Address P. O. Box 157

City Brawley State CA Zip Code 92227-0157

FEC ID number of contributing federal political committee. **C**

Name of Employer Gibson Schaefer Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 348.00

Date of Receipt 03 / 18 / 2009
Transaction ID: 2009M04L11ai01352
Amount of Each Receipt this Period 198.00

C. Full Name (Last, First, Middle Initial)
Mr. Edward Gibson

Mailing Address 34022 N. 85Th Street

City Scottsdale State AZ Zip Code 85266-1345

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai01353
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 568.00

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 458 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Edward Gibson

Mailing Address 34022 N. 85Th Street

City State Zip Code
Scottsdale AZ 85266-1345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01354

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Mr. John W. Gibson

Mailing Address 3011 Bransford Road

City State Zip Code
Augusta GA 30909-3090

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hull Storey Retail Group Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01355

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Robert Gibson

Mailing Address 1 Roebling Way Suite 1901

City State Zip Code
Covington KY 41011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Scanner Applications Ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01356

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **490.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 459 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William J. Gidley

Mailing Address 2210 S.W. Roxbury

City State Zip Code
Portland OR 97225-5143

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01357

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard G. Gieser

Mailing Address 504 E. Forest Avenue

City State Zip Code
Wheaton IL 60187-3836

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.
Wheaton Eye Clinic Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01358

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Lawrence R. Giglio

Mailing Address 16875 Kehrsdale Dr.

City State Zip Code
Chesterfield MO 63005-6531

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.
Grayban Senior Vice President Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01359

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 460 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Warren A. Gilbert, Jr.

Mailing Address 5 Kingsgate Court

City State Zip Code
Dallas TX 75225-2018

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01360

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Leo E. Gilcher

Mailing Address 12315 Burgess Avenue
Apartment 247

City State Zip Code
Whittier CA 90604-3060

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01361

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Dorothy Gilgut

Mailing Address P.O. Box 7266

City State Zip Code
Ocean Park ME 04063-7266

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01362

Amount of Each Receipt this Period
250.00

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 461 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Alan D. Gillan
Mailing Address 3556 W 62nd Avenue
City State Zip Code
Denver CO 80221-1907
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt M M / D D / Y Y Y Y Y
03 / 27 / 2009
Transaction ID: 2009M04L11ai01363
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Bill D. Gillentine
Mailing Address 5755 Fm 390 Road E.
City State Zip Code
Brenham TX 77833-8281
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt M M / D D / Y Y Y Y Y
03 / 23 / 2009
Transaction ID: 2009M04L11ai01364
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. William J. Gillespie
Mailing Address 130 Irvine Cove Place
City State Zip Code
Laguna Beach CA 92651-1042
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00
Date of Receipt M M / D D / Y Y Y Y Y
03 / 31 / 2009
Transaction ID: 2009M04L11ai01365
Amount of Each Receipt this Period 1500.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00
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 462 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John R. Gillis

Mailing Address 2303 Nelson Road

City State Zip Code
Bozeman MT 59718-8741

FEC ID number of contributing federal political committee. **C**

Name of Employer S.G.M. Bio-Tech Occupation Business Manager/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01366

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Geraldine M. Gilmartin

Mailing Address 8 Barney Park

City State Zip Code
Irvington NY 10533-1601

FEC ID number of contributing federal political committee. **C**

Name of Employer RDC Center Occupation Family Counselor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01367

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Chieko N. Gilmer

Mailing Address 12303 E. Villanova Drive

City State Zip Code
Aurora CO 80014-1905

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01368

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► 1285.00

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 463 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Harold Gilmore

Mailing Address 3665 S. County Road 300 E.

City State Zip Code
Liberty IN 47353-9332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01369

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Reed & Priscilla Gilmore

Mailing Address 330 S. 89th Ct.

City State Zip Code
omaha NE 68114-4069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai01370

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard J. Giolando

Mailing Address 353 S. Berkeley Avenue

City State Zip Code
Pasadena CA 91107-5061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01371

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00

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 464 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Geatano P. Giordano

Mailing Address 712 Kimberly Drive

City State Zip Code
Moorestown NJ 08057-4407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Vincent Giordano Corporate Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01372

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Peter L. Girardin

Mailing Address 693 Hickory Road

City State Zip Code
Naples FL 34108-2638

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01373

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. C. Joe Giroir

Mailing Address 1250 Sawmill Road S.

City State Zip Code
Quitman AR 72131-9522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01374

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 465 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Earl E. Gjelde

Mailing Address 790 Rose Acres Ct

City State Zip Code
Loveland CO 80537-9376

FEC ID number of contributing federal political committee. **C**

Name of Employer Spgi Occupation
Ceo

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01375

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Earl E. Gjelde

Mailing Address 790 Rose Acres Ct

City State Zip Code
Loveland CO 80537-9376

FEC ID number of contributing federal political committee. **C**

Name of Employer Spgi Occupation
Ceo

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai01376

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. David M. Glagovsky

Mailing Address 4501 31St Street S.
Apt. 204

City State Zip Code
Arlington VA 22206-4900

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 18 / 2009

Transaction ID: 2009M04L11ai01377

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ▶

770.00

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 466 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. David M. Glagovsky

Mailing Address 4501 31st Street S.
Apt. 204

City State Zip Code
Arlington VA 22206-4900

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 18 / 2009

Transaction ID: 2009M04L11ai01378

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Mr. Patrick W. Glass

Mailing Address 2601 Silverton Dr

City State Zip Code
Las Vegas NV 89134-8835

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai01379

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Patrick W. Glass

Mailing Address 2601 Silverton Dr

City State Zip Code
Las Vegas NV 89134-8835

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai01380

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶

420.00

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 467 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Wendell R. Glassco

Mailing Address 1750 Bohannon Road

City State Zip Code
Boaz AL 35957-3705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai01381

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Abraham S. Glauberman

Mailing Address 802 Enterprise St

City State Zip Code
Cape Girardeau MO 63703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai01382

Amount of Each Receipt this Period
275.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Ann Glendinning

Mailing Address 318 South Beach Road

City State Zip Code
Hobe Sound FL 33455-2605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai01383

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶

3275.00

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 468 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Wadley Raoul Glenn

Mailing Address 2041 Cleveland Street Extension

City Greenville State SC Zip Code 29607-3603

FEC ID number of contributing federal political committee. **C**

Name of Employer Courts, Martin & Associates
Occupation Real Estate Appraiser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai01384
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard Glielmi

Mailing Address 10 De Longis Court

City Sparkill State NY Zip Code 10976-1245

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai01385
Amount of Each Receipt this Period 120.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard Glielmi

Mailing Address 10 De Longis Court

City Sparkill State NY Zip Code 10976-1245

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai01386
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ **670.00**

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 469 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert O. Glover

Mailing Address 1967 Batello Drive

City State Zip Code
Venice FL 34292-4635

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	9	

Transaction ID: 2009M04L11ai01387

Amount of Each Receipt this Period
70.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert O. Glover

Mailing Address 1967 Batello Drive

City State Zip Code
Venice FL 34292-4635

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	9	

Transaction ID: 2009M04L11ai01388

Amount of Each Receipt this Period
70.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Gochee

Mailing Address 13405 322nd Street West

City State Zip Code
Illinois City IL 61259-9500

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	9	

Transaction ID: 2009M04L11ai01389

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **640.00**

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 470 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Vera Boyd Godwin
Mailing Address 490 Oak View Drive
City Vacaville State CA Zip Code 95688-4224
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai01390
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Daniel L. Goelzer
Mailing Address 5941 Searl Terrace
City Bethesda State MD Zip Code 20816-2022
FEC ID number of contributing federal political committee. **C**
Name of Employer P.C.A.O.B. Occupation Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai01391
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Col. Edwin S. Goepfer
Mailing Address 111 Coventry Lane
City Bardstow State KY Zip Code 40004-8733
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai01392
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00
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 471 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Donald Goeres

Mailing Address 4201 Gardendale Court

City State Zip Code
Riverside CA 92505-3460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Brake Masters Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai01393

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald Goeres

Mailing Address 4201 Gardendale Court

City State Zip Code
Riverside CA 92505-3460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Brake Masters Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: 2009M04L11ai01394

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Marion Gogolak

Mailing Address 7040 Pelican Bay Blvd. D401

City State Zip Code
Naples FL 34108-5520

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: 2009M04L11ai01395

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 472 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joseph Goldenberg

Mailing Address 3213 Tidal Pool Cove

City State Zip Code
Lake Mary FL 32746-0866

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **03 / 10 / 2009**

Transaction ID: 2009M04L11ai01396

Amount of Each Receipt this Period **25.00**

B. Full Name (Last, First, Middle Initial)
Mr. Joseph Goldenberg

Mailing Address 3213 Tidal Pool Cove

City State Zip Code
Lake Mary FL 32746-0866

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt **03 / 24 / 2009**

Transaction ID: 2009M04L11ai01397

Amount of Each Receipt this Period **25.00**

C. Full Name (Last, First, Middle Initial)
Mr. Robert C. Goldsmith

Mailing Address 209 15Th Street

City State Zip Code
Manhattan Beach CA 90266-4603

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 31 / 2009**

Transaction ID: 2009M04L11ai01398

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional) ► **300.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 473 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Marie Golly

Mailing Address 34 Coco Plum Dr

City Marathon State FL Zip Code 33050-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation R.N.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai01399

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Rex M. Golobic

Mailing Address 211 Puffin Ct.

City Foster City State CA Zip Code 94404-1318

FEC ID number of contributing federal political committee. **C**

Name of Employer Serra Bowl Inc. Occupation Bowling Center Operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai01400

Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Dr. Manuel A Gomez

Mailing Address 202 Maplewood Avenue

City Ronceverte State WV Zip Code 24970-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai01401

Amount of Each Receipt this Period 200.00

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 474 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John K. Gomillion

Mailing Address 1054 Chateau Drive

City State Zip Code
Helena AL 35080-3556

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Blue Cross / Blue Shield Systems Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01402

Amount of Each Receipt this Period
220.00

B. Full Name (Last, First, Middle Initial)
Rev. Marcos J. Gonzalez

Mailing Address 3768 Glenfeliz Blvd.

City State Zip Code
Los Angeles CA 90039-1741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Archdiocese Of Los Angeles Catholic Priest

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01403

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Dr. Jerry B. Gooch

Mailing Address 6029 Walnut Grove Road
Suite 401

City State Zip Code
Memphis TN 38120-2112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01404

Amount of Each Receipt this Period
375.00

SUBTOTAL of Receipts This Page (optional) ▶ **620.00**

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 475 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Myrl S. Good

Mailing Address 2707 N. Coronado Drive

City State Zip Code
Roswell NM 88201-3464

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30400.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01405

Amount of Each Receipt this Period
30400.00

B. Full Name (Last, First, Middle Initial)
Ms. Debra Goodman

Mailing Address 5151 S. Ohio Street

City State Zip Code
Yorba Linda CA 92886-4180

FEC ID number of contributing federal political committee. **C**

Name of Employer Paragon Building Products Occupation Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01406

Amount of Each Receipt this Period
360.00

C. Full Name (Last, First, Middle Initial)
Mr. Gregory L. Goodman

Mailing Address 2903 Harlinsdale Dr.

City State Zip Code
Rock Hill SC 29732-0213

FEC ID number of contributing federal political committee. **C**

Name of Employer Carolina Pad Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01407

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 31060.00

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 476 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Sheldon G. Goodrich

Mailing Address 27 Tuscany Court

City State Zip Code
Camp Hill PA 17011-1029

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01408

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Sheldon G. Goodrich

Mailing Address 27 Tuscany Court

City State Zip Code
Camp Hill PA 17011-1029

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01409

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr. Sheldon G. Goodrich

Mailing Address 27 Tuscany Court

City State Zip Code
Camp Hill PA 17011-1029

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01410

Amount of Each Receipt this Period
50.00

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 477 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thomas B. Goodson

Mailing Address 567 Adams Road

City Fayetteville State GA Zip Code 30214-4110

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai01411
 Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
Mr. Clarence V. Gordon

Mailing Address 8329 S. Langley Avenue

City Chicago State IL Zip Code 60619-9559

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai01412
 Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Clarence V. Gordon

Mailing Address 8329 S. Langley Avenue

City Chicago State IL Zip Code 60619-9559

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai01413
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 325.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 478 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Richard J. Gordon		Date of Receipt MM / DD / YYYY 03 / 06 / 2009
Mailing Address 420 Colorado Street Apartment 1G		Transaction ID: 2009M04L11ai01414
City Manhattan	State Zip Code KS 66502-6279	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Mr. Richard J. Gordon		Date of Receipt MM / DD / YYYY 03 / 23 / 2009
Mailing Address 420 Colorado Street Apartment 1G		Transaction ID: 2009M04L11ai01415
City Manhattan	State Zip Code KS 66502-6279	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Mr. Richard J. Gordon		Date of Receipt MM / DD / YYYY 03 / 26 / 2009
Mailing Address 420 Colorado Street Apartment 1G		Transaction ID: 2009M04L11ai01416
City Manhattan	State Zip Code KS 66502-6279	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	180.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 479 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Patricia A. Gorman

Mailing Address **220 Holly Drive**

City **Chalfont** State **PA** Zip Code **18914-2031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Thomson Reuters** Occupation **Production Coordinator**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01417

Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Bruce M. Gosser

Mailing Address **6 Bellerosa Court**

City **Saint Louis** State **MO** Zip Code **63122-3358**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Gosser Group** Occupation **Health Care Consultant**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01418

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Brenda J. Gottlieb

Mailing Address **8801 Hunting Trail**

City **Indianapolis** State **IN** Zip Code **46217-4616**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-Employed** Occupation **Self-Employed**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01419

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 480 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Sarah R. Goulard
 Mailing Address P.O. Box 2119
 City State Zip Code
 Wickburgsland AZ 85358
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00
 Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai01420
 Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert J. Gould, Jr.
 Mailing Address 550 Bilper Avenue
 Apartment 6515
 City State Zip Code
 Lindenwold NJ 08021-1870
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Catalent Pharma Occupation Q.A. Auditor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai01421
 Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert E. Goyne
 Mailing Address 116 Brookvalley Road
 City State Zip Code
 Wilmington DE 19807-2004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00
 Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai01422
 Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1600.00
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 481 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert C. Grable

Mailing Address 201 Main Street
Suite 2500

City State Zip Code
Fort Worth TX 76102-3129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kelly, Hart & Hallman, L.- Attorney
L.P.

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01423

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. John J. Grad

Mailing Address 10282 E. Joy Ranch Rd.

City State Zip Code
Scottsdale AZ 85262-5107

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01424

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Henry J. Graebner, II

Mailing Address P.O. Box 913

City State Zip Code
Easley SC 29641-0913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01425

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ▶

900.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 482 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Henry J. Graebner, II
Mailing Address P.O. Box 913
City Easley State SC Zip Code 29641-0913
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai01426
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth N. Graham
Mailing Address 807 Asa Gray Drive Apartment 202
City Ann Arbor State MI Zip Code 48105-3511
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai01427
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Wallace K. Graham
Mailing Address 14 Frost Road
City Northwood State NH Zip Code 03261-4035
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai01428
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 483 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. William & Patricia Graham

Mailing Address P.O. Box 524

City State Zip Code
Franklin NC 28744-0524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01429

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Karren Granader-Losh

Mailing Address 305C S. Reeves Drive

City State Zip Code
Beverly Hills CA 90212-4512

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Marina Dentistry R.D.H.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01430

Amount of Each Receipt this Period
220.00

C.

Full Name (Last, First, Middle Initial)

Mr. Rodolfo G. Granados

Mailing Address 2181 Jamieson Avenue
Unit 2009

City State Zip Code
Alexandria VA 22314-5756

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 2 / 2 0 0 9

Transaction ID: 2009M04L11ai01431

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ►

330.00

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 484 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Frank R. Granara

Mailing Address 95 Shire Road

City State Zip Code
Norwell MA 02061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
G.I.C. President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai01432

Amount of Each Receipt this Period
550.00

B.

Full Name (Last, First, Middle Initial)

Mr. Frank F. Grandone

Mailing Address 43 Carriage Drive

City State Zip Code
Tolland CT 06084-2908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai01433

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Abigail F. Grant

Mailing Address 9230 Wister Drive

City State Zip Code
La Mesa CA 91941-4138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai01434

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶

800.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 485 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William W. Grant

Mailing Address 545 Race Street

City State Zip Code
Denver CO 80206-4122

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	9	

Transaction ID: 2009M04L11ai01435

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Mr. John S. Grassi

Mailing Address 3580 Washington St.

City State Zip Code
San Francisco CA 94118-1849

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	9	

Transaction ID: 2009M04L11ai01436

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. William E. Graves

Mailing Address P.O. Box 950

City State Zip Code
Seneca IL 61360-0950

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	9	

Transaction ID: 2009M04L11ai01437

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1425.00**

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 486 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Joan O. Gray

Mailing Address 415 Surrey Lane

City State Zip Code
Bloomsburg PA 17815-8435

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	9

Transaction ID: 2009M04L11ai01438
 Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert W. Gray, Jr.

Mailing Address 415 Surrey Lane

City State Zip Code
Bloomsburg PA 17815-8435

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	9

Transaction ID: 2009M04L11ai01439
 Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Dr. David Graybill

Mailing Address 6309 S. Hunters Run

City State Zip Code
Pendleton IN 46064-8709

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	0	9

Transaction ID: 2009M04L11ai01440
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 487 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard T. Green

Mailing Address **10880 S.W. Davies Road
Apartment 1014**

City **Beaverton** State **OR** Zip Code **97008-8014**

FEC ID number of contributing federal political committee. C

Name of Employer **Retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai01441

Amount of Each Receipt this Period 105.00

B. Full Name (Last, First, Middle Initial)
Dr. Thomas J. Green

Mailing Address **1 Dunwoody Drive**

City **Carlisle** State **PA** Zip Code **17015-9565**

FEC ID number of contributing federal political committee. C

Name of Employer **Self-Employed** Occupation **Self-Employed**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01442

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. James S. Greene, III

Mailing Address **2476 W. Bayshore Road**

City **Gulf Breeze** State **FL** Zip Code **32563-2524**

FEC ID number of contributing federal political committee. C

Name of Employer **Retired** Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01443

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 1105.00

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 488 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frederick A. Greenland

Mailing Address 403 Rosedale Court

City State Zip Code
Capitola CA 95010-2251

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Advanced Ingredients, Inc. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01444

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Dr. Pamela & Scott Greenwood

Mailing Address 1427 Buckwood Drive

City State Zip Code
Orlando FL 32806-7037

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Orlando Heart Center M.D.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01445

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Lynn Greer

Mailing Address 5137 Boxcroft Place

City State Zip Code
Nashville TN 37205-3701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai01446

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ► **820.00**

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 489 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Mina Jean Greer		Date of Receipt
	Mailing Address 9001 E. Eagle Feather Rd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City State Zip Code Tucson AZ 85749-9255		Transaction ID: 2009M04L11ai01447
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer G and G Construction Company Occupation CEO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) Mr. William T. Greer		Date of Receipt
	Mailing Address 1401 Heritage Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City State Zip Code Dayton OH 45459-3304		Transaction ID: 2009M04L11ai01448
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 251.00
	Name of Employer U.S. Air Force Occupation Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 251.00

C.	Full Name (Last, First, Middle Initial) Mrs. Ellen M. Gregory		Date of Receipt
	Mailing Address 379 Sorrento Knolls Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 24 / 2009
	City State Zip Code Blowing Rock NC 28605-9472		Transaction ID: 2009M04L11ai01449
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00

SUBTOTAL of Receipts This Page (optional)	701.00
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 490 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John O. Gregory

Mailing Address 9410 Prince William Street

City Manassas State VA Zip Code 20110-2518

FEC ID number of contributing federal political committee. **C**

Name of Employer Gregory Construction Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai01450
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Marie H. Gregory

Mailing Address 2125 Highway 14 E.

City Landrum State SC Zip Code 29356-9777

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai01451
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Dr. Ray N. Gregory

Mailing Address P.O. Box 1577

City Corinth State MS Zip Code 38835-1577

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai01452
Amount of Each Receipt this Period 300.00

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 491 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Connie M. Greiman

Mailing Address 755 State Street
Apartment 4

City Garner State IA Zip Code 50438-1554

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai01453

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Claude Greiner

Mailing Address 1544 Swordbill Drive

City Holiday State FL Zip Code 34690-6355

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01454

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. James R. Greiner

Mailing Address 1113 Kelly Drive
Apartment 3

City Winesville State GA Zip Code 31313-5197

FEC ID number of contributing federal political committee. **C**

Name of Employer Us Army Occupation Building Inspector

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: 2009M04L11ai01455

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 250.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 492 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David Grenader

Mailing Address 4708 Caroline Street

City State Zip Code
Houston TX 77004-5025

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01456

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Jane Gretter

Mailing Address 4830 Kennett Pike

City State Zip Code
Wilmington DE 19807-1866

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01457

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mrs. Jane Gretter

Mailing Address 4830 Kennett Pike

City State Zip Code
Wilmington DE 19807-1866

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai01458

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 1400.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 493 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Harry S. Gretz		Date of Receipt	
	Mailing Address 4732 Homestead Place		M M / D D / Y Y Y Y 03 / 23 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai01459
	Matthews	NC	28104-8905	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		230.00	
Name of Employer Transamerican Equipment Corporation		Occupation Owner & President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 345.00		

B.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Robert Gribben		Date of Receipt	
	Mailing Address 421 Sunrise Drive		M M / D D / Y Y Y Y 03 / 10 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai01460
	Weirton	WV	26062-5043	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Mr. David G. Griffin		Date of Receipt	
	Mailing Address 2808 N. Garfield Street		M M / D D / Y Y Y Y 03 / 02 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai01461
	Midland	TX	79705-7408	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		400.00	
Name of Employer Griffin Petroleum Company		Occupation Petroleum Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional)	▶	880.00
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 494 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Dean Griffin

Mailing Address 3118 Burningtrees Mountain Road S.E.

City State Zip Code
Decatur AL 35603-5333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Decatur General Hospital Healthcare Administration

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai01462
Amount of Each Receipt this Period: 220.00

B. Full Name (Last, First, Middle Initial)
Mrs. Dorothy G. Griffin

Mailing Address 8209 Phillips Road

City State Zip Code
Rome NY 13440-1518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Varflex Corporation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai01463
Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
Mr. Elijah Shelton Griffin

Mailing Address 2306 Quail Road N.W.

City State Zip Code
Wilson NC 27896-1348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Alliance One International International Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai01464
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) ► 2870.00

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 495 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Elijah Shelton Griffin

Mailing Address 2306 Quail Road N.W.

City State Zip Code
Wilson NC 27896-1348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Alliance One International International Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01465

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Nancy D. Griffin

Mailing Address 16 Wesley Street

City State Zip Code
Monmouth Beach NJ 07750-1149

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01466

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. William R. Griffin

Mailing Address 7404 Corsair Court

City State Zip Code
Arlington TX 76016-5317

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lockheed Martin Mfc Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01467

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 496 / 1945
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) S Griffis		Date of Receipt
	Mailing Address 2358 Mills Road		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Jacksonville	FL	32216
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Ret.		Occupation Ret.	Transaction ID: 2009M04L11ai01468
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"/>		
Amount of Each Receipt this Period			<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Richard S. Griffith		Date of Receipt
	Mailing Address 3417 Milam St.		<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77002
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai01469
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1640.00"/>		
Amount of Each Receipt this Period			<input type="text" value="400.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Richard S. Griffith		Date of Receipt
	Mailing Address 3417 Milam St.		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77002
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai01470
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1640.00"/>		
Amount of Each Receipt this Period			<input type="text" value="240.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="890.00"/>
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 497 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard S. Griffith

Mailing Address 3417 Milam St.

City State Zip Code
Houston TX 77002

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1640.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01471

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. George B. Grim

Mailing Address 500 Centennial Drive
Apartment 625

City State Zip Code
East Peoria IL 61611-4911

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01472

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. William H. Grimes

Mailing Address 7500 N. Calle Sin Envidia
Apartment 2201

City State Zip Code
Tucson AZ 85718-7352

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01473

Amount of Each Receipt this Period
50.00

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: (check only one)	PAGE 498 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Carmen Grinstead		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address P.O. Box 6059		Transaction ID: 2009M04L11ai01474		
	City Santa Maria	State CA	Zip Code 93456-6059	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation Self-Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Perrin Grissom		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 502 Cypress Street		Transaction ID: 2009M04L11ai01475		
	City Leland	State MS	Zip Code 38756-3115	Amount of Each Receipt this Period 205.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00			

C.	Full Name (Last, First, Middle Initial) Mr. Richard D. Grist, Jr.		Date of Receipt MM / DD / YYYY 03 / 13 / 2009		
	Mailing Address P.O. Box 818		Transaction ID: 2009M04L11ai01476		
	City Blakely	State GA	Zip Code 39823-0818	Amount of Each Receipt this Period 360.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation Self-Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

SUBTOTAL of Receipts This Page (optional)	▶	815.00
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 499 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Gary A. Groenke	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 526 74Th Street	Transaction ID: 2009M04L11ai01477
	City State Zip Code Kenosha WI 53143-5568	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Design Partners	Occupation Graphic Designer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Robert Grogan	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1747 Minden Drive	Transaction ID: 2009M04L11ai01478
	City State Zip Code Holladay UT 84121-1227	Amount of Each Receipt this Period 220.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Daily's Premium Meats	Occupation Regional Sales Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Roy J. Grogan	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 12 Fossil Hill Road	Transaction ID: 2009M04L11ai01479
	City State Zip Code Weatherford TX 76087-8626	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1470.00
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 500 / 1945

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Peter P. Gromacki

Mailing Address 88 White Bridge Road

City State Zip Code
Middletown NY 10940-7320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai01480

Amount of Each Receipt this Period
525.00

B.

Full Name (Last, First, Middle Initial)
Mr. Nathan Gross

Mailing Address 8007 Valley View Drive

City State Zip Code
Chesapeake Beach MD 20732-4661

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sfa Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai01481

Amount of Each Receipt this Period
125.00

C.

Full Name (Last, First, Middle Initial)
Mr. William V. Gross

Mailing Address 11600 Rolling Glen Way

City State Zip Code
Upper Marlboro MD 20772-4293

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Xerox Corporation Marketing Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai01482

Amount of Each Receipt this Period
250.00

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 501 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Ewel Grossberg

Mailing Address 1 Vista Del Golfo

City State Zip Code
Long Beach CA 90803-4166

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai01483

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. John Grounds

Mailing Address 36 Pondway

City State Zip Code
Alton IL 62002-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Horticulture

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai01484

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Ltc. Gilbert J. Grout, U.S.A. (Re

Mailing Address 4587 Middleton Park Circle W.

City State Zip Code
Jacksonville FL 32224-6684

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01485

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ▶

805.00

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 502 / 1945
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Daniel Grover		Date of Receipt
	Mailing Address 3021 Groves Edge Lane		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Waxhaw	NC	28173-8291
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Ronald Blue & Co. Llc		Occupation Financial Advisor	Transaction ID: 2009M04L11ai01486
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="480.00"/>	<input type="text" value="150.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Herbert Grover		Date of Receipt
	Mailing Address 330 Main Street		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Rowley	MA	01969-1511
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Paradigm Technologies, In- c.		Occupation Analyst	Transaction ID: 2009M04L11ai01487
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="260.00"/>	<input type="text" value="110.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Jeffrey R. Grubb		Date of Receipt
	Mailing Address 2068 Greenside Way		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Birmingham	AL	35226-6278
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Georgia Power Co.		Occupation Project Manager	Transaction ID: 2009M04L11ai01488
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="215.00"/>	<input type="text" value="25.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="285.00"/>
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 503 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey R. Grubb

Mailing Address 2068 Greenside Way

City Birmingham State AL Zip Code 35226-6278

FEC ID number of contributing federal political committee. **C**

Name of Employer Georgia Power Co. Occupation Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai01489

Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Mr. Jeffrey R. Grubb

Mailing Address 2068 Greenside Way

City Birmingham State AL Zip Code 35226-6278

FEC ID number of contributing federal political committee. **C**

Name of Employer Georgia Power Co. Occupation Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai01490

Amount of Each Receipt this Period 55.00

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey R. Grubb

Mailing Address 2068 Greenside Way

City Birmingham State AL Zip Code 35226-6278

FEC ID number of contributing federal political committee. **C**

Name of Employer Georgia Power Co. Occupation Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai01491

Amount of Each Receipt this Period 55.00

SUBTOTAL of Receipts This Page (optional) ► 135.00

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 504 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thomas M. Grubbs

Mailing Address 2232 Farm 1496 Road

City Anderson State TX Zip Code 77830

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: 2009M04L11ai01492
Amount of Each Receipt this Period: 125.00

B. Full Name (Last, First, Middle Initial)
Rev. Thaddeus A. Grzelak

Mailing Address 4662 Brisa Drive

City Palmdale State CA Zip Code 93551-1231

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai01493
Amount of Each Receipt this Period: 130.00

C. Full Name (Last, First, Middle Initial)
Miss Marie-Christine Guerrin

Mailing Address 155 East 31st Street
Apartment 9C

City New York State NY Zip Code 10016-6850

FEC ID number of contributing federal political committee. **C**

Name of Employer Freelance Occupation Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai01494
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1255.00

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 505 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. J. Lynn Guffee

Mailing Address 5704 Overton Drive

City State Zip Code
Allen TX 75002-5430

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	9

Transaction ID: 2009M04L11ai01495

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Margaret G. Guidroz

Mailing Address 16818 Amberwood Drive

City State Zip Code
Baton Rouge LA 70810-6528

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	0	9

Transaction ID: 2009M04L11ai01496

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Margaret G. Guidroz

Mailing Address 16818 Amberwood Drive

City State Zip Code
Baton Rouge LA 70810-6528

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: 2009M04L11ai01497

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 506 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Rev. Rod J. Guillermo

Mailing Address P.O. Box 124631

City State Zip Code
San Diego CA 92112-4631

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai01498

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Rev. Rod J. Guillermo

Mailing Address P.O. Box 124631

City State Zip Code
San Diego CA 92112-4631

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai01499

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)
Mr. David C Gum, Jr.

Mailing Address 3026 Woodside Rd

City State Zip Code
Clearbrook VA 22624-1346

FEC ID number of contributing federal political committee. **C**

Name of Employer National Fruit Product Co-pany Occupation President

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai01500

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional)

2820.00

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 507 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Heinz L. Gundlach

Mailing Address 150 Algoma Road

City State Zip Code
Palm Beach FL 33480-4902

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01501

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mr. Alexander C. Gunn

Mailing Address 7460 Shenandoah Road

City State Zip Code
Pensacola FL 32526-3846

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01502

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Randy F. Gunter

Mailing Address 207 General Moultrie Drive

City State Zip Code
Bonneau SC 29431-8503

FEC ID number of contributing federal political committee. **C**

Name of Employer Jacobs Occupation Senior Piping Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01503

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 508 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Victor H. Gunther

Mailing Address 1092 Sanders Drive

City Moraga State CA Zip Code 94556-1917

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01504

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Mr. Victor H. Gunther

Mailing Address 1092 Sanders Drive

City Moraga State CA Zip Code 94556-1917

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01505

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Marshall L. Gurley

Mailing Address P.O. Box 90907
Centurion Construction Co., Inc.

City Raleigh State NC Zip Code 27675-0907

FEC ID number of contributing federal political committee. **C**

Name of Employer Centurion Construction Company Occupation Contractor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01506

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **325.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 509 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frederick E. Guth

Mailing Address 12681 Erickon Ranch Road

City State Zip Code
Piedmont SD 57769-7216

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01507

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Stanley Guthrie

Mailing Address P.O. Box 2367

City State Zip Code
Palmer AK 99645-2367

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Hair Stylist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01508

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr. Nicasio Gutierrez

Mailing Address 3616 Windover Drive

City State Zip Code
Norman OK 73072-3249

FEC ID number of contributing federal political committee. **C**

Name of Employer State Of Oklahoma Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai01509

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 510 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Laura T. Gutman

Mailing Address 310 Watts Street

City State Zip Code
Durham NC 27701-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Na Na

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai01510

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Robert A. Gutman

Mailing Address 310 Watts Street

City State Zip Code
Durham NC 27701-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Durham Nephrology Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01511

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Robert A. Gutman

Mailing Address 310 Watts Street

City State Zip Code
Durham NC 27701-2039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Durham Nephrology Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01512

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 511 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Kathryn B. Guymon
Mailing Address P.O. Box 1209

City State Zip Code
Rancho Santa Fe CA 92067-1209

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01513

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Kathryn B. Guymon
Mailing Address P.O. Box 1209

City State Zip Code
Rancho Santa Fe CA 92067-1209

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01514

Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
Mrs. Kathryn B. Guymon
Mailing Address P.O. Box 1209

City State Zip Code
Rancho Santa Fe CA 92067-1209

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01515

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► 210.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 512 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Alan Guzowski

Mailing Address 228 S. Milwaukee St.

City State Zip Code
Denver CO 80209-3216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tricon Geophysics, Inc. Geophysicist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01516

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Mr. George D. Gwizd, Sr.

Mailing Address 19 Buckingham Avenue

City State Zip Code
Old Saybrook CT 06475-2014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01517

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary A. Haag

Mailing Address 7171 Country Club Dr.

City State Zip Code
La Jolla CA 92037-5612

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01518

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 1290.00

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 513 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David Michael Haas

Mailing Address 357 County House Lane

City Marietta State OH Zip Code 45750-8017

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai01519
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. George K. Haas

Mailing Address 5000 S.W. 83Rd Street

City Miami State FL Zip Code 33143-8510

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai01520
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Col. Fredrick J. Haase, U. S. A. (

Mailing Address 1821 E. Dayton Road

City Caro State MI Zip Code 48723-9478

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai01521
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

TOTAL This Period (last page this line number only) ►

**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 514 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Ms. Mary Hackman
 Mailing Address 16 Sarazen Ct.
 City Florham Park State NJ Zip Code 07932-2714
 Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai01522
 Amount of Each Receipt this Period 75.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

B. Full Name (Last, First, Middle Initial)
 Mr. & Mrs. T. Morris Hackney
 Mailing Address 40 Country Club Road
 City Birmingham State AL Zip Code 35213-3625
 Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai01523
 Amount of Each Receipt this Period 200.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

C. Full Name (Last, First, Middle Initial)
 Ms. Claudine Y. Haddock
 Mailing Address 3450 Bonner Drive
 City Olive Branch State MS Zip Code 38654-8123
 Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai01524
 Amount of Each Receipt this Period 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► **375.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 515 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frederick D. Haffner

Mailing Address 1226 West Rockwood Drive

City State Zip Code
Cincinnati OH 45208-3338

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01525

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard C. Hagedorn

Mailing Address 75 San Luis Obispo

City State Zip Code
Fort Pierce FL 34951-2816

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01526

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard C. Hagedorn

Mailing Address 75 San Luis Obispo

City State Zip Code
Fort Pierce FL 34951-2816

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 465.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01527

Amount of Each Receipt this Period
265.00

SUBTOTAL of Receipts This Page (optional) ► **715.00**

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 516 / 1945
(check only one)

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<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George O. Haggard, III

Mailing Address 725 West 2Nd North Street

City State Zip Code
Morristown TN 37814-3966

FEC ID number of contributing federal political committee. **C**

Name of Employer Rpn Inc Occupation
Asst Manager, Machine Shop

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01528

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. George O. Haggard, III

Mailing Address 725 West 2Nd North Street

City State Zip Code
Morristown TN 37814-3966

FEC ID number of contributing federal political committee. **C**

Name of Employer Rpn Inc Occupation
Asst Manager, Machine Shop

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01529

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Mr. Alan Haggerty

Mailing Address 2707 Berryland Drive

City State Zip Code
Oakton VA 22124-1404

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. Government - D.O.D. Occupation
Senior Executive Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2009

Transaction ID: 2009M04L11ai01530

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **425.00**

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 517 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Shirley Honickman Hahn	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 502 N Hillcrest Rd	Transaction ID: 2009M04L11ai01531
	City State Zip Code Beverly Hills CA 90210-3541	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. William Martin Hait	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 19 Morningside Drive	Transaction ID: 2009M04L11ai01532
	City State Zip Code Livingston NJ 07039-1827	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Walgreens	Occupation Pharmacist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Dr. Michael V. Hajjar	Date of Receipt MM / DD / YYYY 03 / 04 / 2009
	Mailing Address 2138 W. Falcon Point Court	Transaction ID: 2009M04L11ai01533
	City State Zip Code Boise ID 83703-4298	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Self-Employed	Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1750.00
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 518 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William Halacoglu

Mailing Address 3840 Fawn Drive

City State Zip Code
 Rochester MI 48306-1030

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 10 / 2009

Transaction ID: 2009M04L11ai01534

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul P. Hale

Mailing Address 81B Ragged Hill Road

City State Zip Code
 Hubbardston MA 01452-1621

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 02 / 2009

Transaction ID: 2009M04L11ai01535

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Evetts Haley, Jr.

Mailing Address P.O. Box 2515

City State Zip Code
 Midland TX 79702-2515

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 10 / 2009

Transaction ID: 2009M04L11ai01536

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional) ► **1450.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 519 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Patrick E. Haley

Mailing Address 22201 Red Laurel Lane

City State Zip Code
Estero FL 33928-2978

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01537

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. David Logan Halferty

Mailing Address 1450 E. Harmon Avenue
Apartment 115C

City State Zip Code
Las Vegas NV 89119-5946

FEC ID number of contributing federal political committee. **C**

Name of Employer Casino Royale & Hotel Occupation Hotel Houseman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01538

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Gary M. Hall

Mailing Address 27 Powderhorn Drive

City State Zip Code
Wayne NJ 07470-4227

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01539

Amount of Each Receipt this Period
100.00

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 520 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Gary M. Hall

Mailing Address 27 Powderhorn Drive

City State Zip Code
Wayne NJ 07470-4227

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01540

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Gary M. Hall

Mailing Address 27 Powderhorn Drive

City State Zip Code
Wayne NJ 07470-4227

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01541

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Dr. James B. Hall

Mailing Address 1114 Belgrave Place

City State Zip Code
Charlotte NC 28203-5243

FEC ID number of contributing federal political committee. **C**

Name of Employer Carolinas Medical Center Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01542

Amount of Each Receipt this Period
200.00

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 521 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James N. Hall

Mailing Address P.O. Box 3065

City State Zip Code
Cookeville TN 38502-3065

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01543

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
Mr. Joe Bennett Hall

Mailing Address P.O. Box 445

City State Zip Code
Anahuac TX 77514-0445

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01544

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Ollabelle Hall

Mailing Address 3603 Meadow Lake Lane

City State Zip Code
Houston TX 77027

FEC ID number of contributing federal political committee. **C**

Name of Employer Na Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai01545

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **4250.00**

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 522 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Ollabelle Hall		Date of Receipt
	Mailing Address 3603 Meadow Lake Lane		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77027
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01546
Name of Employer Na		Occupation Housewife	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="500.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. Richard W. Hall		Date of Receipt
	Mailing Address 4525 Duffer Loop		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Sebring	FL	33872-3860
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01547
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	

C.	Full Name (Last, First, Middle Initial) Ms. Debora Hallford		Date of Receipt
	Mailing Address 2793 East Weaver Avenue		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Centennial	CO	80121-2952
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01548
Name of Employer Schlumberger		Occupation Sr. Presr. Transient Geoscient	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
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 523 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Clifton Roy Halliday, Jr.
Mailing Address 3410 S. Townline Rd
City Prudenville State MI Zip Code 48651-9794
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt MM / DD / YYYY 03 / 30 / 2009
Transaction ID: 2009M04L11ai01549
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Rev. Msgr. Albert W. Hallin
Mailing Address 416 County Road 1100 N.
Church Of St. Boniface
City Seymour State IL Zip Code 61875-9748
FEC ID number of contributing federal political committee. **C**
Name of Employer Catholic Diocese Of Peoria Occupation Roman Catholic Priest
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt MM / DD / YYYY 03 / 30 / 2009
Transaction ID: 2009M04L11ai01550
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Harvey Richard Hallman
Mailing Address 1500 Country Club Drive
City High Point State NC Zip Code 27262-4558
FEC ID number of contributing federal political committee. **C**
Name of Employer Electronic Dat Magnetic's Inc. Occupation President/Geo
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt MM / DD / YYYY 03 / 17 / 2009
Transaction ID: 2009M04L11ai01551
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00
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 524 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert Halmi

Mailing Address 1325 Avenue Of The Americas

City State Zip Code
New York NY 10019-6026

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01552

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert Halmi

Mailing Address 1325 Avenue Of The Americas

City State Zip Code
New York NY 10019-6026

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01553

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Marty Halper

Mailing Address 7 Terrace Cir Apt 2A

City State Zip Code
Great Neck NY 11021-4125

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01554

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 525 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert Halverstadt		Date of Receipt
	Mailing Address 3161 Meadow Ridge		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Redding	CT	06896-3227
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 2009M04L11ai01555
Name of Employer Requested		Occupation Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="400.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. Ronald O. Hamburger		Date of Receipt
	Mailing Address 2824 Benson Way		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Belmont	CA	94002-2939
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 2009M04L11ai01556
Name of Employer Simpson Gumpelte & Heger		Occupation Structural Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="200.00"/>
		<input type="text" value="400.00"/>	

C.	Full Name (Last, First, Middle Initial) Mr. John Hamilton		Date of Receipt
	Mailing Address 18262 N. 1750 E. Road		<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Pontiac	IL	61764-2934
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>	Transaction ID: 2009M04L11ai01557
Name of Employer Parno Realty		Occupation Real Estate Appraiser	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="40.00"/>
		<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="340.00"/>
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 526 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John Hamilton

Mailing Address 18262 N. 1750 E. Road

City State Zip Code
Pontiac IL 61764-2934

FEC ID number of contributing federal political committee. **C**

Name of Employer Parno Realty Occupation Real Estate Appraiser

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01558

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Ms. Virginia Hamister

Mailing Address 24212 Lake Road

City State Zip Code
Bay Village OH 44140-2955

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01559

Amount of Each Receipt this Period
330.00

C. Full Name (Last, First, Middle Initial)
Mr. John H. Hammergren

Mailing Address 10 Winding Lane

City State Zip Code
Orinda CA 94563-1000

FEC ID number of contributing federal political committee. **C**

Name of Employer McKesson Corporation Occupation C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01560

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **605.00**

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 527 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Leslie B. Hammond

Mailing Address 121 Treehaven Street

City State Zip Code
Gaithersburg MD 20878-5748

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Deloitte & Touche Financial Analyst/C.P.A.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 252.09

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: 2009M04L11ai01561

Amount of Each Receipt this Period
2.09

B.

Full Name (Last, First, Middle Initial)

Mr. Patrick R. Handy

Mailing Address 653 Moondale Drive

City State Zip Code
El Paso TX 79912-4237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai01562

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)

Dr. Thomas E. Hanes

Mailing Address 5223 Heathrow Hills Drive

City State Zip Code
Brentwood TN 37027-6548

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Associated Pathologist, P.L.C. Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai01563

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

752.09

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 528 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Thomas E. Hanes	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 5223 Heathrow Hills Drive	Transaction ID: 2009M04L11ai01564
	City State Zip Code Brentwood TN 37027-6548	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Associated Pathologist, P.L.C.	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

B.	Full Name (Last, First, Middle Initial) Ms. Greta S. Hanisch	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 600 W. 246Th Street Apartment 1107	Transaction ID: 2009M04L11ai01565
	City State Zip Code Bronx NY 10471-3624	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

C.	Full Name (Last, First, Middle Initial) Mr. Michael J. Hanley	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 5630 Central College Rd.	Transaction ID: 2009M04L11ai01566
	City State Zip Code Westerville OH 43081-9573	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Self-employed	Occupation Self Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 529 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Robert J Hannum, III

Mailing Address 3450 Palencia Dr.
#1004

City Tampa State FL Zip Code 33618-1850

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01567

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Julian Hansakul

Mailing Address 37 Parker Blvd.

City Monsey State NY Zip Code 10952-1438

FEC ID number of contributing federal political committee. **C**

Name of Employer N.Y.C. Dept. Of Small Business Svcs. Occupation Cost Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: 2009M04L11ai01568

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Hugh C Hansen

Mailing Address 140 W. 62 Street

City New York State NY Zip Code 10023-7407

FEC ID number of contributing federal political committee. **C**

Name of Employer Fordham University Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01569

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 530 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. Shawn F. Hansen
 Mailing Address 1018 Grand Oak Lane
 City State Zip Code
 Virginia Beach VA 23455-7213
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2009
Transaction ID: 2009M04L11ai01570
 Amount of Each Receipt this Period
 90.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 United States Navy U.S. Military
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

B. Full Name (Last, First, Middle Initial)
 Mr. Stewart G. Hansen
 Mailing Address 3010 Sylvania Drive
 City State Zip Code
 West Des Moines IA 50266-2149
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2009
Transaction ID: 2009M04L11ai01571
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

C. Full Name (Last, First, Middle Initial)
 Mr. Virgil Dale Hanson
 Mailing Address 4306 Custer Avenue
 City State Zip Code
 Flint MI 48507-2781
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2009
Transaction ID: 2009M04L11ai01572
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

SUBTOTAL of Receipts This Page (optional) ► **440.00**
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 531 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Virgil Dale Hanson

Mailing Address 4306 Custer Avenue

City State Zip Code
Flint MI 48507-2781

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01573

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert T. Hardeman

Mailing Address 903 Robert E. Lee Drive

City State Zip Code
Greenwood MS 38930-2434

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01574

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. John A. Hardick

Mailing Address 6025 N. Rockwell Street

City State Zip Code
Chicago IL 60659-4006

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01575

Amount of Each Receipt this Period
400.00

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 532 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Carolyn J. Hardin		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address P.O. Box 702		Transaction ID: 2009M04L11ai01576		
	City Hendersonville	State NC	Zip Code 28793-0702	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Hardin Company	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Joe S Hardin, Jr.		Date of Receipt MM / DD / YYYY 03 / 25 / 2009		
	Mailing Address 820 Picacho Lane		Transaction ID: 2009M04L11ai01577		
	City Santa Barbara	State CA	Zip Code 93108-1229	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) Dr. John C. Hardin, Jr.		Date of Receipt MM / DD / YYYY 03 / 13 / 2009		
	Mailing Address 410 Briarwood Drive		Transaction ID: 2009M04L11ai01578		
	City Shreveport	State LA	Zip Code 71106-1804	Amount of Each Receipt this Period 810.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer L.S.U. Medical School	Occupation Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 810.00			

SUBTOTAL of Receipts This Page (optional)	▶	1560.00
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 533 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Ken Hardin

Mailing Address P. O. Box 4310

City State Zip Code
Horseshoe Bay TX 78657-4310

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01579

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms Marilyn J. Hardin

Mailing Address 128 Crisco Road

City State Zip Code
Florence MS 39073-7636

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01580

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Lawrence Hardwicke

Mailing Address 1625 Westwood Drive

City State Zip Code
Abilene TX 79603-4253

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01581

Amount of Each Receipt this Period
3.00

SUBTOTAL of Receipts This Page (optional) ► **553.00**

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 534 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lawrence Hardwicke

Mailing Address 1625 Westwood Drive

City Abilene State TX Zip Code 79603-4253

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt 03 / 13 / 2009

Transaction ID: 2009M04L11ai01582

Amount of Each Receipt this Period 5.00

B. Full Name (Last, First, Middle Initial)
Mr. Lawrence Hardwicke

Mailing Address 1625 Westwood Drive

City Abilene State TX Zip Code 79603-4253

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 286.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai01583

Amount of Each Receipt this Period 3.00

C. Full Name (Last, First, Middle Initial)
Mr. Glenn Hargrove

Mailing Address 5006 Willow Point

City Parker State TX Zip Code 75002

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai01584

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► **508.00**

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 535 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Sharon Hargrove

Mailing Address 5006 Willow Point

City State Zip Code
Parker TX 75002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01585

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas Harlin

Mailing Address 1247 Hillview Lane

City State Zip Code
Franklin TN 37064-7431

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai01586

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth L. Harlow

Mailing Address 1117 Belvedere Street

City State Zip Code
Cincinnati OH 45202-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01587

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 536 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth L. Harlow

Mailing Address 1117 Belvedere Street

City State Zip Code
Cincinnati OH 45202-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01588

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mr. Kenneth L. Harlow

Mailing Address 1117 Belvedere Street

City State Zip Code
Cincinnati OH 45202-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai01589

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth L. Harlow

Mailing Address 1117 Belvedere Street

City State Zip Code
Cincinnati OH 45202-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai01590

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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 537 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth L. Harlow

Mailing Address 1117 Belvedere Street

City State Zip Code
Cincinnati OH 45202-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01591

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mr. C. Ray Harmon

Mailing Address 11418 County Road

City State Zip Code
Nickerson NE 68044

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai01592

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Christopher Harmon

Mailing Address 36409 Moser Road

City State Zip Code
Winchester CA 92596-8639

FEC ID number of contributing federal political committee. **C**

Name of Employer Creative Labs Occupation Field Marketing Specialist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01593

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 538 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Jeffrey C. Harms	Date of Receipt MM / DD / YYYY 03 / 19 / 2009
	Mailing Address 1804 Avalon Ct.	Transaction ID: 2009M04L11ai01594
	City Raleigh State NC Zip Code 27612-2342	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Alcatel-Lucent Occupation Digital Designer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. Floyd Harnagel	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 428 S. Durbin Street Casper Pay-Less Drug Company	Transaction ID: 2009M04L11ai01595
	City Casper State WY Zip Code 82601-2818	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00	

C.	Full Name (Last, First, Middle Initial) Mr. Glenn M. Harned	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 11644 Crest Maple Drive	Transaction ID: 2009M04L11ai01596
	City Woodbridge State VA Zip Code 22192-6640	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Booz Allen Hamilton Occupation Defense Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
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 539 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John Harper

Mailing Address P.O. Box 621

City State Zip Code
Saint Albans MO 63073-0621

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01597

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Frances Dorchester Harrell

Mailing Address P.O. Box 2768

City State Zip Code
Pensacola FL 32513-4945

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01598

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. James D. Harrell, III

Mailing Address P.O. Box 22676

City State Zip Code
Jackson MS 39225-2676

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01599

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 540 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James D. Harrell, III
Mailing Address P.O. Box 22676

City State Zip Code
Jackson MS 39225-2676

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01600

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Bobbye F. Harris
Mailing Address 135 Windsor Drive

City State Zip Code
Calhoun GA 30701-2055

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01601

Amount of Each Receipt this Period
900.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph Harris, Jr.
Mailing Address 5405 Joni Circle

City State Zip Code
Pinson AL 35126-3625

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. Government Occupation Public Affairs

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01602

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 541 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Kenneth Harris

Mailing Address P.O. Box 705

City State Zip Code
Olney IL 62450-0705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai01603

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Leslie Harris

Mailing Address 44700 Sage Road
#H

City State Zip Code
Aguanga CA 92536-9749

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai01604

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Steven Keith Harris, Sr.

Mailing Address 4330 Duck Down

City State Zip Code
Winter Haven FL 33884

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bernie Little Dist., Inc. President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai01605

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 542 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
William & Adelaide Harris

Mailing Address PO Box 629

City State Zip Code
Salisbury CT 06068-0629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01606

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles R. Harrison

Mailing Address 1825 Lawrence Street
Suite 444

City State Zip Code
Denver CO 80202-1817

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai01607

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. M. G. Harrison

Mailing Address P. O. Box 4144

City State Zip Code
Ventura CA 93007-0144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
E. J. Harrison & Son's, Inc. Chief Financial Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01608

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 1700.00

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 543 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Olive Harrison

Mailing Address 1801 20Th Street
Apartment B25

City Ames State IA Zip Code 50010-5161

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Unemployed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2005.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai01609
 Amount of Each Receipt this Period: 1005.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul L. Harry

Mailing Address 12 Three Mile Harbor Drive

City East Hampton State NY Zip Code 11937-3347

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai01610
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Gurnee F. Hart

Mailing Address 133 E. 64Th Street

City New York State NY Zip Code 10065-7045

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai01611
 Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ► 1455.00

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 544 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Athena Hart-Kolle

Mailing Address Balentine Rd. Holdings
135 East Main Street

City Caledonia State MN Zip Code 55921

FEC ID number of contributing federal political committee. **C**

Name of Employer Hart Interior Design Occupation Business Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01612

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Bill Harting

Mailing Address 101 Taylor Road

City Estill Springs State TN Zip Code 37330-3831

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01613

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. James A. Hartman

Mailing Address 4916 Jule Drive

City Panora State IA Zip Code 50216-8620

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai01614

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶ 1750.00

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 545 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Vincent W. Hartnett

Mailing Address 2652 Horseshoe Trail

City State Zip Code
Chester Springs PA 19425-3000

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01615

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Dr. William H Hartt, III

Mailing Address 20914 Morada Court

City State Zip Code
Boca Raton FL 33433-1715

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01616

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Everett Hartwel, Jr.

Mailing Address 17 Sylvester Court

City State Zip Code
Norwalk CT 06855-2613

FEC ID number of contributing federal political committee. **C**

Name of Employer Purdue Pharma Occupation Clerk Service

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01617

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **5150.00**

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 546 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Everett Hartwel, Jr.

Mailing Address 17 Sylvester Court

City State Zip Code
Norwalk CT 06855-2613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Purdue Pharma Clerk Service

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai01618

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Dorothy E. Hartzler

Mailing Address 2118 W. 116Th Street

City State Zip Code
Leawood KS 66211-2953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01619

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Dr. Geoffrey O. Hartzler

Mailing Address 2118 W. 116Th Street

City State Zip Code
Leawood KS 66211-2953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai01620

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

550.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 547 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Harriet B. Harvey		Date of Receipt
	Mailing Address 6011 Breakpoint Trail		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Dallas	TX	75252-2369
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01621
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	100.00

B.	Full Name (Last, First, Middle Initial) Mr. Will Harvey		Date of Receipt
	Mailing Address 7421 Le Conte Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	El Paso	TX	79912-7129
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01622
Name of Employer Harvey Development Company, Inc.		Occupation C. E. O.	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	250.00

C.	Full Name (Last, First, Middle Initial) Mr. William Harvey		Date of Receipt
	Mailing Address 11310 Waller Rd. W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 02 / 2009
	City	State	Zip Code
	Theodore	AL	36582-8197
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01623
Name of Employer Requested		Occupation Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 330.00	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 548 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
John & Erin Hasbrook

Mailing Address 5111 Putah Creek Road

City State Zip Code
Winters CA 95694-9629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01624

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Bruce Hasch

Mailing Address 1029 S. Butternut Circle

City State Zip Code
Frankfort IL 60423-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 251.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01625

Amount of Each Receipt this Period
251.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert S. Hathorne

Mailing Address 10295 E. Rising Sun Drive

City State Zip Code
Scottsdale AZ 85262-3072

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai01626

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1001.00**

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 549 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Todd A. Hatoff

Mailing Address 3800 Lake Shore Dr. 12A

City State Zip Code
Chicago IL 60613-3411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Allen Brothers Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01627

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr. John I. Hatridge

Mailing Address 2708 Mountain Laurel Lane

City State Zip Code
Austin TX 78703-1143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01628

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
John R Haugen

Mailing Address 2303 RR 620 So.
Ste. 135-303

City State Zip Code
Austin TX 78734

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
On-Time Transcription Co., Inc. Ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01629

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 550 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert L. Hawkins, Jr.

Mailing Address 4208B Willowlake Court

City State Zip Code
Jefferson City MO 65109-4532

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai01630

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert L. Hawkins, Jr.

Mailing Address 4208B Willowlake Court

City State Zip Code
Jefferson City MO 65109-4532

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai01631

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Chester G. Hawley

Mailing Address 2690 Edington Road

City State Zip Code
Columbus OH 43221-2503

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai01632

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

350.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 551 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Diana Hawthorne

Mailing Address 1616 Glenbrook Court

City State Zip Code
Columbia MO 65203-5345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University Of Missouri Professor Of Radiology

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai01633

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. John & Shirley Hayde

Mailing Address 1101 Sunset Shores Lane

City State Zip Code
Climax Springs MO 65324-3926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J2 Printing President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01634

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard Haydinger

Mailing Address 78 E. Main Street

City State Zip Code
Marlton NJ 08053-2142

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai01635

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ▶

1700.00

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 552 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Bryan Hayes

Mailing Address 1820 Holly Hill Drive

City State Zip Code
Durham NC 27713-6061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Duke University Health System Registered Nurse

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01636

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. H. Michael Hayes

Mailing Address 10170 Xavier Court

City State Zip Code
Westminster CO 80031-2340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01637

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Norris Hayes

Mailing Address 23822 Legendary Lane Dr.

City State Zip Code
Katy TX 77494-0148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01638

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1400.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 553 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Thomas B. Hayward

Mailing Address 1223 Spring Street
Apartment 901

City State Zip Code
Seattle WA 98104-3576

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Voyager Expanded Learning Executive Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01639

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Terry G. Hazard

Mailing Address 5484 Coral Reef Avenue

City State Zip Code
La Jolla CA 92037-7026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01640

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Thomas N. Hazen

Mailing Address 17 College View Heights

City State Zip Code
South Hadley MA 01075-1607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hazen Paper Company, Inc. Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01641

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 554 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Rosemary M. Heard		Date of Receipt																					
	Mailing Address 1746 Potwin Dr.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	6		2	0	0	9														
	City State Zip Code Baton Rouge LA 70810		Transaction ID: 2009M04L11ai01642																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Csrs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Ret. Aggregate Year-to-Date ▼ 1550.00																						

B.	Full Name (Last, First, Middle Initial) Mrs. Rosemary M. Heard		Date of Receipt																					
	Mailing Address 1746 Potwin Dr.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	7		2	0	0	9														
	City State Zip Code Baton Rouge LA 70810		Transaction ID: 2009M04L11ai01643																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Csrs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Ret. Aggregate Year-to-Date ▼ 1550.00																						

C.	Full Name (Last, First, Middle Initial) Rev. John W. Hearty, Jr.		Date of Receipt																					
	Mailing Address P.O. Box 92		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	9		2	0	0	9														
	City State Zip Code Lucedale MS 39452-4742		Transaction ID: 2009M04L11ai01644																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Retired Aggregate Year-to-Date ▼ 600.00																						

SUBTOTAL of Receipts This Page (optional)	▶	1540.00
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 555 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Harold C. Heath	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 1 Heath Lane P.O. Box 185	Transaction ID: 2009M04L11ai01645
	City State Zip Code Butler GA 31006-0185	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Carl A. Hechmer, Jr.	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 735 Oak Springs Road	Transaction ID: 2009M04L11ai01646
	City State Zip Code Bryn Mawr PA 19010-1735	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. David T. Hedrick	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 12950 Brady Road	Transaction ID: 2009M04L11ai01647
	City State Zip Code Jacksonville FL 32223-2508	Amount of Each Receipt this Period 202.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer National Audit Services Occupation Business Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 202.00	

SUBTOTAL of Receipts This Page (optional)	502.00
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 556 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Roger D. Heedum

Mailing Address 5010 S. 118Th Street
Suite 240

City Omaha State NE Zip Code 68137-2208

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01648

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Ms. Margaret B. Heers

Mailing Address 1290 N. Applegate Avenue

City Fresno State CA Zip Code 93727-9770

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01649

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bill Hehr

Mailing Address P.O. Box 4061
2007 Warwood Ave.

City Wheeling State WV Zip Code 26003

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01650

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1500.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 557 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Charles Heide

Mailing Address 5825 6Th Place

City State Zip Code
Kenosha WI 53144-7216

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 2 / 2 0 0 9

Transaction ID: 2009M04L11ai01651

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)

Mr. Mark L. Heinold

Mailing Address 333 River Street
Apartment 1143

City State Zip Code
Hoboken NJ 07030-5873

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Verizon Executive Director-Marketing

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai01652

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Mark L. Heinold

Mailing Address 333 River Street
Apartment 1143

City State Zip Code
Hoboken NJ 07030-5873

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Verizon Executive Director-Marketing

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai01653

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 558 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Stephen Heitzman

Mailing Address 29322 Champions Drive

City State Zip Code
Magnolia TX 77355-5631

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai01654

Amount of Each Receipt this Period

400.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Wilbur & Doris Heitzman

Mailing Address 75 Geronimo Drive

City State Zip Code
Sedona AZ 86336

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai01655

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Rev. Mark Philip Helge

Mailing Address 3370 Montlake Drive

City State Zip Code
Rockford IL 61114-5519

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai01656

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1700.00

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 559 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Christine Helin	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 3252 N. Cottontail Cir.	Transaction ID: 2009M04L11ai01657
	City State Zip Code Tucson AZ 85749-9401	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Lovitt & Touche Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Brenda Heller	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 974 Heron Circle	Transaction ID: 2009M04L11ai01658
	City State Zip Code Seal Beach CA 90740-5616	Amount of Each Receipt this Period 230.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Requested Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Gracia Heller	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 63 Bogota St.	Transaction ID: 2009M04L11ai01659
	City State Zip Code Staten Island NY 10314-6225	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Myron Heller Agency Insurance Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	730.00
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 560 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Ronald & Cindy A. Hellstern

Mailing Address 10827 Crooked Creek Drive
Suite 250

City State Zip Code
Dallas TX 75229-4303

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Physician Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai01660

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Elaine S. Henderson

Mailing Address 10 Sterling Place

City State Zip Code
Rancho Mirage CA 92270-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer Hasa Inc Occupation
Cfo

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai01661

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Kathleen Henderson

Mailing Address 432 Patterson Drive

City State Zip Code
Monrovia CA 91016-1623

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai01662

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 561 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Roberta M. Henderson

Mailing Address 4316 Glenview Avenue

City State Zip Code
Glenview KY 40025-7509

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01663

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Emmaline P. Henn

Mailing Address 6 Meadow Court

City State Zip Code
Huntington IN 46750-4406

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01664

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Mr. Maurice Henry

Mailing Address 4736 E. Latoka Court

City State Zip Code
Springfield MO 65809-3152

FEC ID number of contributing federal political committee. **C**

Name of Employer A.W.G. Occupation Associate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai01665

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ► **2470.00**

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 562 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Meredith E. Henry

Mailing Address 1372 Parkview Estates Drive

City State Zip Code
Ellisville MO 63021-4643

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01666

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard T. Henshaw, III

Mailing Address P.O. Box 189

City State Zip Code
Waccabuc NY 10597-0189

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai01667

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Kenneth P. Hensley

Mailing Address 15 Upper Hillcrest Avenue

City State Zip Code
Albany NY 12203-3369

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 505.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai01668

Amount of Each Receipt this Period
505.00

SUBTOTAL of Receipts This Page (optional)

1205.00

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 563 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Connie S. Herbert

Mailing Address 25550 N. Tuscarora Court

City State Zip Code
Lake Barrington IL 60010-1140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01669

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Don Herington

Mailing Address 5209 Freedom Court

City State Zip Code
Fairfield CA 94533-9744

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai01670

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)

Mr. Inocenle R. Hernandez

Mailing Address 5557 S.W. 91 Avenue

City State Zip Code
Miami FL 33165-2814

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
P. & H. Structural Construction

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai01671

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ▶

805.00

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 564 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Luis E. Hernandez

Mailing Address 9455 S.W. 44Th Street

City State Zip Code
Miami FL 33165-5827

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01672

Amount of Each Receipt this Period
101.00

B. Full Name (Last, First, Middle Initial)
Ms. Erika Herndon

Mailing Address 2501 Keating Lane

City State Zip Code
Austin TX 78703-2317

FEC ID number of contributing federal political committee. **C**

Name of Employer Self- Small Business Owner Occupation Stationery Manufacturer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01673

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Chet Herren

Mailing Address H.C. 63 Box 53-1

City State Zip Code
Pawhuska OK 74056

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 505.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01674

Amount of Each Receipt this Period
505.00

SUBTOTAL of Receipts This Page (optional) ► 706.00

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 565 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Sylvia Herren
 Mailing Address H.C. 63 Box 53-1
 City Pawhuska State OK Zip Code 74056
 Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai01675
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cahory Construction, Inc. Occupation Co-Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

B. Full Name (Last, First, Middle Initial)
Ms. Gayle S Herrington
 Mailing Address P.O. Box 10507
 City Brooksville State FL Zip Code 34603-0507
 Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai01676
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Granite Services, Inc. Occupation Director, Technical Recruiting
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
Dr. & Mrs. David M. Hess
 Mailing Address 1705 Aubusson Court
 City Bakersfield State CA Zip Code 93311-1537
 Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai01677
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Self-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 566 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George L. Hesse

Mailing Address 2325 Tracy Place N.W.

City State Zip Code
Washington DC 20008-1640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Manor Management Corporat- Real Estate Management
ion

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai01678

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. George L. Hesse

Mailing Address 2325 Tracy Place N.W.

City State Zip Code
Washington DC 20008-1640

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Manor Management Corporat- Real Estate Management
ion

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	0	9

Transaction ID: 2009M04L11ai01679

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Phil Hessel

Mailing Address 4601 N.W. 119Th Street

City State Zip Code
Oklahoma City OK 73162-1953

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Whitton Supply Driver

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 476.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai01680

Amount of Each Receipt this Period
476.00

SUBTOTAL of Receipts This Page (optional) ► **876.00**

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 567 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James N. Heston

Mailing Address 41 Franklin School Way

City State Zip Code
Metuchen NJ 08840-1859

FEC ID number of contributing federal political committee. **C**

Name of Employer Metlife Occupation Insurance Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai01681

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Kenneth L. Heydt

Mailing Address P.O. Box 214
113 N. Columbus Avenue

City State Zip Code
Waltham MN 55982-0214

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01682

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Ms. Ruth Hiatt

Mailing Address 610 W. Main Street

City State Zip Code
Danville IN 46122-1018

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai01683

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **2725.00**

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 568 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Carlton Hibbard

Mailing Address 971 Bellaire Lane

City State Zip Code
Rockledge FL 32955

FEC ID number of contributing federal political committee. **C**

Name of Employer
Brevard County Commissioners

Occupation
Lead Vehicle Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01684

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Gary Hickerson

Mailing Address 212 Haller Avenue

City State Zip Code
East Alton IL 62024-1509

FEC ID number of contributing federal political committee. **C**

Name of Employer
Citigroup

Occupation
Sales Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
353.80

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01685

Amount of Each Receipt this Period
110.00

C.

Full Name (Last, First, Middle Initial)
Mr. Gary Hickerson

Mailing Address 212 Haller Avenue

City State Zip Code
East Alton IL 62024-1509

FEC ID number of contributing federal political committee. **C**

Name of Employer
Citigroup

Occupation
Sales Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
353.80

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01686

Amount of Each Receipt this Period
243.80

SUBTOTAL of Receipts This Page (optional) ► **1353.80**

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 569 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Bonnie Hickman

Mailing Address 711 E. 200 S.

City Spanish Fork State UT Zip Code 84660-2241

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 03 / 18 / 2009
Transaction ID: 2009M04L11ai01687
Amount of Each Receipt this Period: 20.00

B. Full Name (Last, First, Middle Initial)
Mrs. Bonnie Hickman

Mailing Address 711 E. 200 S.

City Spanish Fork State UT Zip Code 84660-2241

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai01688
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Francis G. Hickman

Mailing Address 4129 S. Paiute Way

City Sierra Vista State AZ Zip Code 85650-8432

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai01689
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **570.00**

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 570 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Andrew D. Hicks

Mailing Address 118 Heritage Cir

City State Zip Code
Panama City Beach FL 32407-2702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Surgical Systems Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai01690

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Lewis W. Hicks, III

Mailing Address 40 Dune Drive

City State Zip Code
Chatham MA 02633-2519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai01691

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Ms. Teena Hicks

Mailing Address 210 Park Avenue
Suite 220

City State Zip Code
Oklahoma City OK 73102-5602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Teena Hicks Company Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01692

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

875.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 571 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Mr. & Mrs. W. Glen Hicks</p> <p>Mailing Address 809 Kennon Street</p> <hr/> <p>City State Zip Code Minden LA 71055-2311</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2009</p> <p>Transaction ID: 2009M04L11ai01693</p> <p>Amount of Each Receipt this Period 100.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Mr. & Mrs. W. Glen Hicks</p> <p>Mailing Address 809 Kennon Street</p> <hr/> <p>City State Zip Code Minden LA 71055-2311</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2009</p> <p>Transaction ID: 2009M04L11ai01694</p> <p>Amount of Each Receipt this Period 100.00</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Pete Hidalgo, II</p> <p>Mailing Address 4 High Ridge</p> <hr/> <p>City State Zip Code Santa Fe NM 87506</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Piedra Capital, Ltd. Occupation Principal</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2009</p> <p>Transaction ID: 2009M04L11ai01695</p> <p>Amount of Each Receipt this Period 250.00</p>
---	---

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 572 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Jack Higdon

Mailing Address 3851 Fair Oaks Boulevard

City State Zip Code
Sacramento CA 95864-7215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
California Moving Systems President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01696

Amount of Each Receipt this Period
220.00

B. Full Name (Last, First, Middle Initial)
Mrs. Joyce B. Hildebrand

Mailing Address 7855 Lilly Chapel Georgesville Roa

City State Zip Code
London OH 43140-9461

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01697

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul Hildebrand

Mailing Address P.O. Box 371

City State Zip Code
Milan IN 47031-0371

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01698

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **670.00**

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 573 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James E. Hill, Sr.
Mailing Address P.O. Box 50
City State Zip Code
Palmerton PA 18071-0050
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 03 / 18 / 2009
Transaction ID: 2009M04L11ai01699
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. James E. Hill, Sr.
Mailing Address P.O. Box 50
City State Zip Code
Palmerton PA 18071-0050
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai01700
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Jerry Hill
Mailing Address P.O. Box 1125
City State Zip Code
Crosby TX 77532-1125
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai01701
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 574 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John G. Hill

Mailing Address 7302 Via Granja

City State Zip Code
San Jose CA 95135-1348

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01702

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Mrs. Josephine A. Hill

Mailing Address 1416 W. James Way

City State Zip Code
Anaheim CA 92801-4711

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01703

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Luther L. Hill, Jr.

Mailing Address 1209 Bell Avenue

City State Zip Code
Des Moines IA 50315-1018

FEC ID number of contributing federal political committee. **C**

Name of Employer Nyemaster Law Firm Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 301.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01704

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 575 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Sarah B. Hill

Mailing Address 2929 Buffalo Speedway
Unit 1308

City State Zip Code
Houston TX 77098-1713

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01705

Amount of Each Receipt this Period
110.00

B.

Full Name (Last, First, Middle Initial)
Mr. Tracy Hill

Mailing Address 149 Adare Drive

City State Zip Code
Cary IL 60013-1695

FEC ID number of contributing federal political committee. **C**

Name of Employer Kimball Hill Management Co. Occupation Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01706

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. W. Christian Hill

Mailing Address 4528 Sea Cliff Court

City State Zip Code
Seaside CA 93955-6546

FEC ID number of contributing federal political committee. **C**

Name of Employer Sentry Alarm Systems Occupation Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01707

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **860.00**

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 576 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Wayne J. Hilmer

Mailing Address 1551 Via Tuscany

City State Zip Code
Winter Park FL 32789-2657

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01708

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Arthur R. Hilsinger

Mailing Address 8 Jackson Pond Road

City State Zip Code
Dedham MA 02026-5524

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01709

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. James A. Hilton

Mailing Address 99 Peaceful Way

City State Zip Code
Tiverton RI 02878-4015

FEC ID number of contributing federal political committee. **C**

Name of Employer Smith Barney Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01710

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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 577 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William C. Himstreet

Mailing Address 15241 N.E. 20Th Street
Apartment 233

City Bellevue State WA Zip Code 98007-3813

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai01711
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. William C. Himstreet

Mailing Address 15241 N.E. 20Th Street
Apartment 233

City Bellevue State WA Zip Code 98007-3813

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai01712
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven Hines

Mailing Address 137 Plantation Cir S

City Ponte Vedra Beach State FL Zip Code 32082-3971

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai01713
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 350.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 578 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Olav Christian Hinke

Mailing Address 5400 Snapper Creek Road

City State Zip Code
Coral Gables FL 33156-3446

FEC ID number of contributing federal political committee. **C**

Name of Employer Interamericana Transport Industries, I
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	9

Transaction ID: 2009M04L11ai01714

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Jill Maureen Hinkey

Mailing Address P.O. Box 2119

City State Zip Code
Loomis CA 95650

FEC ID number of contributing federal political committee. **C**

Name of Employer Countryside Home Loans
Occupation Home Loan Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	0	9

Transaction ID: 2009M04L11ai01715

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Edmond R. Hinkle

Mailing Address 266 Crystal Springs Road

City State Zip Code
Blountville TN 37617-6665

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	0	9

Transaction ID: 2009M04L11ai01716

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **520.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 579 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Edmond R. Hinkle

Mailing Address 266 Crystal Springs Road

City Blountville State TN Zip Code 37617-6665

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 16 / 2009

Transaction ID: 2009M04L11ai01717

Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert E. Hinkley

Mailing Address 1554 Shoecraft Road

City Penfield State NY Zip Code 14526-9707

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai01718

Amount of Each Receipt this Period 105.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert E. Hinkley

Mailing Address 1554 Shoecraft Road

City Penfield State NY Zip Code 14526-9707

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai01719

Amount of Each Receipt this Period 80.00

SUBTOTAL of Receipts This Page (optional) ► 205.00

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 580 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William L. Hinson, Sr.
Mailing Address 270 Rabon Road
City Columbia State SC Zip Code 29223-5821
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai01720
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Jeffrey A. Hirsch
Mailing Address 10516 Lindbrook Drive
City Los Angeles State CA Zip Code 90024-3326
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai01721
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Brad Hirst
Mailing Address P.O. Box 1210
City Noblesville State IN Zip Code 46061-1210
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 05 / 2009
Transaction ID: 2009M04L11ai01722
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 581 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Vance E. Hitch

Mailing Address 1114 Old Cedar Road

City State Zip Code
McLean VA 22102-2437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Andersen Consulting System Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai01723

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Barbara Cox Hite

Mailing Address 335 Green Spring Court

City State Zip Code
Hampton VA 23669-1727

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai01724

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Judith S. Hjartarson

Mailing Address 8812 E. Sonoran Way

City State Zip Code
Gold Canyon AZ 85218-7131

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01725

Amount of Each Receipt this Period
250.00

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 582 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Thanh Thuy Ho

Mailing Address 27 Westport

City Irvine State CA Zip Code 92620-2656

FEC ID number of contributing federal political committee. **C**

Name of Employer Adt Security Services Occupation Sales Rep

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai01726
Amount of Each Receipt this Period 300.00

B.

Full Name (Last, First, Middle Initial)
Dr. Michael Hoch

Mailing Address 5300 Hamilton Avenue
Apartment 1706

City Cincinnati State OH Zip Code 45224-3165

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai01727
Amount of Each Receipt this Period 2500.00

C.

Full Name (Last, First, Middle Initial)
Mr. John Hocker

Mailing Address 6112 Goldtree Way

City Bethesda State MD Zip Code 20817-5839

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai01728
Amount of Each Receipt this Period 201.00

SUBTOTAL of Receipts This Page (optional) ► 3001.00

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 583 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thomas James Hockycko

Mailing Address 313 Saint Andrews Circle

City Lynchburg State VA Zip Code 24503-3700

FEC ID number of contributing federal political committee. **C**

Name of Employer Seven Hills Construction Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai01729

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Luther Hodges

Mailing Address 20114 Scott

City Chapel Hill State NC Zip Code 27517-8558

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai01730

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Lee Hoefert

Mailing Address 2164 Marion Drive

City Las Vegas State NV Zip Code 89115-5515

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 02 / 2009

Transaction ID: 2009M04L11ai01731

Amount of Each Receipt this Period 100.00

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: (check only one)	PAGE 584 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Lee Hoefert	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 2164 Marion Drive	Transaction ID: 2009M04L11ai01732
	City State Zip Code Las Vegas NV 89115-5515	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Frank J. Hoenemeyer	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 1865 Bay Road Apartment 110	Transaction ID: 2009M04L11ai01733
	City State Zip Code Vero Beach FL 32963-3075	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Fred Hoffman	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 2950 Gleneagles Pointe	Transaction ID: 2009M04L11ai01734
	City State Zip Code Alpharetta GA 30005	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Kilpatrick Stockton Llp Occupation Chief Human Resources Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 585 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frederic H. Hoffman

Mailing Address 2 Dogwood Circle

City State Zip Code
Myerstown PA 17067-1700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A. & H. Fuel Corporate Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01735

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Frederic H. Hoffman

Mailing Address 2 Dogwood Circle

City State Zip Code
Myerstown PA 17067-1700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A. & H. Fuel Corporate Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01736

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Greg Hoffmann

Mailing Address 14390 S Avenue 2 3/4 E

City State Zip Code
Yuma AZ 85365-9212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01737

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 586 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles H. Hofgaarden

Mailing Address 891 Flintridge Avenue

City State Zip Code
La Canada Flintrid CA 91011-4064

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 10 / 2009
Transaction ID: 2009M04L11ai01738
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Lynn M. Hofland

Mailing Address 1043 Bradford Drive

City State Zip Code
Sunnyvale CA 94089-1553

FEC ID number of contributing federal political committee. **C**

Name of Employer A.S.R.C. Aerospace Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai01739
Amount of Each Receipt this Period: 70.00

C. Full Name (Last, First, Middle Initial)
Mr. Lynn M. Hofland

Mailing Address 1043 Bradford Drive

City State Zip Code
Sunnyvale CA 94089-1553

FEC ID number of contributing federal political committee. **C**

Name of Employer A.S.R.C. Aerospace Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 257.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai01740
Amount of Each Receipt this Period: 27.00

SUBTOTAL of Receipts This Page (optional) ► 347.00

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 587 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Kenneth Hohenberger

Mailing Address 1100 Adams Street
Unit 101

City State Zip Code
Ames IA 50010-4124

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai01741

Amount of Each Receipt this Period

110.00

B.

Full Name (Last, First, Middle Initial)
Mr. Abraham S. Hoin

Mailing Address 209 S. Washington St

City State Zip Code
Spokane WV 99201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai01742

Amount of Each Receipt this Period

425.00

C.

Full Name (Last, First, Middle Initial)
Mr. George R. Hokenstad

Mailing Address 29520 Oceanport Road

City State Zip Code
Rancho Palos Verde CA 90275-5702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 730.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai01743

Amount of Each Receipt this Period

365.00

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 588 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joe W. Holcomb

Mailing Address 9045 Larston Street

City State Zip Code
Houston TX 77055-6508

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	9

Transaction ID: 2009M04L11ai01744
 Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Ellis Holdiness, Jr.

Mailing Address 269 Hubert Holdiness Road

City State Zip Code
Louisville MS 39339-6725

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: 2009M04L11ai01745
 Amount of Each Receipt this Period
 60.00

C. Full Name (Last, First, Middle Initial)
Ms. Raylene Holladay

Mailing Address 8926 Ross Lane

City State Zip Code
New Port Richey FL 34654-5423

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	0	9

Transaction ID: 2009M04L11ai01746
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional) ► **560.00**

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 589 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Sandra R. Holland

Mailing Address P.O. Box 368

City State Zip Code
Nantucket MA 02554-0368

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NANTUCKET HOUSE ANTIQUES Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai01747

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Marvin D. Hollenbeck

Mailing Address 3379 Mill Vista Road
Unit 408

City State Zip Code
Highlands Ranch CO 80129-2608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01748

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
Mr. Marvin D. Hollenbeck

Mailing Address 3379 Mill Vista Road
Unit 408

City State Zip Code
Highlands Ranch CO 80129-2608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01749

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 1210.00

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 590 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Larey Holliday

Mailing Address 11001 S.E. 291St Street

City Auburn State WA Zip Code 98092-1909

FEC ID number of contributing federal political committee. **C**

Name of Employer Lgholliday Business Services Occupation Janitorial/Courier

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai01750
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Floyd Holloway, Jr.

Mailing Address 228 Southampton Lane

City Venice State FL Zip Code 34293-4278

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai01751
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Keith Holloway

Mailing Address 411 Cashmere Road

City Boise State ID Zip Code 83702-1621

FEC ID number of contributing federal political committee. **C**

Name of Employer Western Health Care Occupation C. E. O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai01752
Amount of Each Receipt this Period 300.00

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 591 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Elwood R Holm

Mailing Address 1238 West Roscoe Street

City Chicago State IL Zip Code 60657-1424

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai01753

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Katherine E. Holman

Mailing Address 116 Montana Drive

City Chadd Ford State PA Zip Code 19317-9283

FEC ID number of contributing federal political committee. **C**

Name of Employer Xonex, Inc. Occupation President / C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai01754

Amount of Each Receipt this Period 200.00

C.

Full Name (Last, First, Middle Initial)
Col. & Mrs E. Y. Holt, Jr.

Mailing Address 100 E. Ocean View Avenue
U.S.M.C. (Ret.)

City Norfolk State VA Zip Code 23503-1635

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai01755

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ▶ **325.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 592 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Nelson W. Holt

Mailing Address P.O. Box 60

City State Zip Code
Edgewater MD 21037-0060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bausum & Duckett Electric- Electrical Contractor
al Co

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1005.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01756

Amount of Each Receipt this Period
1005.00

B. Full Name (Last, First, Middle Initial)
Mrs. Julie M. Holtze

Mailing Address 5001 Lake Shore Drive

City State Zip Code
Okoboji IA 51355-2595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01757

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Peter Holzer

Mailing Address 240 S. Bridge Avenue
Building 1

City State Zip Code
Red Bank NJ 07701-1402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Intercontinental Cargo Ex- Executive
press, Ltd.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai01758

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1555.00

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 593 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Michael B. Honan

Mailing Address 4329 Corinth Drive

City Birmingham State AL Zip Code 35213-1836

FEC ID number of contributing federal political committee. **C**

Name of Employer Cardio Vascular Association, P.C. Occupation Cardiologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01759

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. John W. Hood, Jr.

Mailing Address 3700 S.W. 30Th Avenue

City Fort Lauderdale State FL Zip Code 33312-6707

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01760

Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. John W. Hood, Jr.

Mailing Address 3700 S.W. 30Th Avenue

City Fort Lauderdale State FL Zip Code 33312-6707

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01761

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 594 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth C. Hood

Mailing Address 10030 E. Chestnut Drive

City State Zip Code
Sun Lakes AZ 85248-6812

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01762

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Grant E. Hook

Mailing Address 122 Iris Drive

City State Zip Code
Cedar Falls IA 50613-6311

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01763

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Martha P. Hoots

Mailing Address P.O. Box 36

City State Zip Code
Deeth NV 89823-0036

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01764

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)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 595 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Stuart C. Hope

Mailing Address 694 Debordieu Boulevard

City State Zip Code
Georgetown SC 29440-7150

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01765

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Teerri Hopkins

Mailing Address 15610 S.E. Bybee Drive

City State Zip Code
Portland OR 97236-7835

FEC ID number of contributing federal political committee. **C**

Name of Employer Royal Bearing Occupation Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01766

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Pat Horan

Mailing Address 1764 43Rd Road

City State Zip Code
Heartwell NE 68945-2031

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01767

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 596 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Norman P. Horn

Mailing Address 3112 Castleton Court

City State Zip Code
Oakton VA 22124-1763

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01768

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Daniel J. Hornaday

Mailing Address 14300 Chenal Parkway #7082

City State Zip Code
Little Rock AR 72211-5805

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01769

Amount of Each Receipt this Period
255.00

C.

Full Name (Last, First, Middle Initial)
Mr. John R. Horne

Mailing Address 112 Muirfield Drive

City State Zip Code
Ponte Vedra FL 32082-3932

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6900.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01770

Amount of Each Receipt this Period
6900.00

SUBTOTAL of Receipts This Page (optional) ► **7455.00**

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 597 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Arthur Hornick

Mailing Address 143 Morgan Farm Drive

City State Zip Code
Leesburg GA 31763-3572

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Sales Representative

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01771

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Diane B. Horsley

Mailing Address 13 Upland Terrace

City State Zip Code
Allegany NY 14706-1128

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01772

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Anthony Horton

Mailing Address 148 Andover Rd

City State Zip Code
Billerica MA 01821

FEC ID number of contributing federal political committee. **C**

Name of Employer The Container Store Occupation Retail

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01773

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 598 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Donald R Horton, Jr.
Mailing Address P.O. Box 1634

City State Zip Code
Ferriday LA 71334-1634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
D&D Drilling Self Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai01774
 Amount of Each Receipt this Period
 150.00

B. Full Name (Last, First, Middle Initial)
Mr. Edward H. Horton
Mailing Address P.O. Box 274

City State Zip Code
Ocean Beach NY 11770-0274

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 505.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: 2009M04L11ai01775
 Amount of Each Receipt this Period
 505.00

C. Full Name (Last, First, Middle Initial)
Mr. Alexander L. Horvath
Mailing Address 8 Buckskin Ln.

City State Zip Code
North Hampton NH 03862-2058

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	9

Transaction ID: 2009M04L11ai01776
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional) ► 705.00

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 599 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George Horvath

Mailing Address 4991 S. Azalea Circle

City State Zip Code
Saint George UT 84790-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 490.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	0	9

Transaction ID: 2009M04L11ai01777

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
Mr. George Horvath

Mailing Address 4991 S. Azalea Circle

City State Zip Code
Saint George UT 84790-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 490.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: 2009M04L11ai01778

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Dan L. Hosfield

Mailing Address 6811 Shawnee Mission Pkwy.

City State Zip Code
Shawnee Msn KS 66202-4031

FEC ID number of contributing federal political committee. **C**

Name of Employer Hosfield Associates, Inc. Occupation President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: 2009M04L11ai01779

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **410.00**

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 600 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Bertha T. Hoskins

Mailing Address 2202 Spinnaker Court

City State Zip Code
Reston VA 20191-4704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01780

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Jerry W. Hostetter

Mailing Address 12 Berndale Drive

City State Zip Code
Westport CT 06880-2742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Smithfield Foods, Inc. Public Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai01781

Amount of Each Receipt this Period

270.00

C.

Full Name (Last, First, Middle Initial)
Mr. Billy Howard

Mailing Address P.O. Box 8217

City State Zip Code
Horseshoe Bay TX 78657-8217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai01782

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

970.00

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 601 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Fredrick W. Howe

Mailing Address 7728 Laramie Court

City San Diego State CA Zip Code 92120-1405

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 16 / 2009

Transaction ID: 2009M04L11ai01783

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Roger Howe

Mailing Address 667 Lynwood Drive

City Encinitas State CA Zip Code 92024-2388

FEC ID number of contributing federal political committee. **C**

Name of Employer Chairman Occupation Reliant Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 25 / 2009

Transaction ID: 2009M04L11ai01784

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Lauren Howell

Mailing Address P.O. Box 419

City Pampa State TX Zip Code 79066-0419

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai01785

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ▶ **525.00**

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 602 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Judith Hoyt

Mailing Address 2830 Tanner Lake Trl. NW

City Marietta State GA Zip Code 30064-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai01786
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. James R. Hruby

Mailing Address 28W440 Main Street

City Warrenville State IL Zip Code 60555-3343

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai01787
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Dan Hubbard

Mailing Address 16420 Brandsford Point

City Chesterfield State MO Zip Code 63005-4548

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 10 / 2009
Transaction ID: 2009M04L11ai01788
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 603 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. William Hale Hubbell

Mailing Address 888 Brickell Key Drive
Apartment 1508

City State Zip Code
Miami FL 33131

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai01789

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Frances F. Huber

Mailing Address P.O. Box 100

City State Zip Code
Glen Rock PA 17327-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai01790

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Lee Huddleston

Mailing Address 6940 Belinder Avenue

City State Zip Code
Mission Hills KS 66208-2760

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai01791

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

1800.00

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 604 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Dan L. Hudgens		Date of Receipt	
	Mailing Address 1185 S. 700 W.		M M / D D / Y Y Y Y 03 / 12 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai01792
	Heber City	UT	84032-5762	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		350.00		
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		

B.	Full Name (Last, First, Middle Initial) Mrs. Frances D. Hudson		Date of Receipt	
	Mailing Address 18417 Dunblane Court		M M / D D / Y Y Y Y 03 / 05 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai01793
	Cornelius	NC	28031-7531	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		100.00		
Name of Employer Requested		Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00		

C.	Full Name (Last, First, Middle Initial) Sherrie Hudson		Date of Receipt	
	Mailing Address 2312 Cross Bend Road		M M / D D / Y Y Y Y 03 / 31 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai01794
	Plano	TX	75023-6409	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		250.00		
Name of Employer Thomson Reuters		Occupation Technology		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	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 605 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth R. Huff

Mailing Address 3962 N. Hackberry Way

City State Zip Code
Boise ID 83702-1662

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai01795

Amount of Each Receipt this Period
275.00

B. Full Name (Last, First, Middle Initial)
Mr. Don Huffer

Mailing Address P. O. Box 94

City State Zip Code
Marshall OK 73056-0094

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 ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01796

Amount of Each Receipt this Period
450.00

C. Full Name (Last, First, Middle Initial)
Mr. James E. Huffer

Mailing Address 750 S. Ocean Blvd.
Apartment 14N

City State Zip Code
Boca Raton FL 33432-5301

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01797

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **975.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 606 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Dorothy Charles Huffman

Mailing Address 600 Brownstone Drive

City State Zip Code
Gibsonville NC 27249-2854

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai01798

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Ms. Dorothy Charles Huffman

Mailing Address 600 Brownstone Drive

City State Zip Code
Gibsonville NC 27249-2854

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai01799

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Mr. Charles E. Hugel

Mailing Address P. O. Box 438

City State Zip Code
Melvin Village NH 03850-0438

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01800

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

720.00

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 607 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Dale E. Hughes

Mailing Address 704 N.W. 143Rd Street

City State Zip Code
Edmond OK 73013-1947

FEC ID number of contributing federal political committee. **C**

Name of Employer: J. & D. Hughes Electric, L.L.C. Occupation: Electrician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01801

Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Dale E. Hughes

Mailing Address 704 N.W. 143Rd Street

City State Zip Code
Edmond OK 73013-1947

FEC ID number of contributing federal political committee. **C**

Name of Employer: J. & D. Hughes Electric, L.L.C. Occupation: Electrician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01802

Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald W. Hughes

Mailing Address 6 Dellwood Court

City State Zip Code
Hunt Valley MD 21030-1426

FEC ID number of contributing federal political committee. **C**

Name of Employer: CAMDEN PARTNERS Holdings, L.L.C. Occupation: Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01803

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 608 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Mako N. Hughes

Mailing Address 55889 Pinehurst

City State Zip Code
La Quinta CA 92253-4724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01804

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Vincent S Hughes

Mailing Address 560 Ivanhoe Plaza

City State Zip Code
Orlando FL 32804-6332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hughes Supply, Inc. Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01805

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Carol Hull

Mailing Address P.O. Box 257

City State Zip Code
Hermiston OR 97838-0257

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C. & H. Fertilizer Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01806

Amount of Each Receipt this Period
500.00

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 609 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Larry Hulsey

Mailing Address P.O. Box 1143

City State Zip Code
Graham TX 76450-1143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 415.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai01807

Amount of Each Receipt this Period
415.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Frances B. Hume

Mailing Address 489 Village Place

City State Zip Code
Longwood FL 32779-6041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 780.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai01808

Amount of Each Receipt this Period
180.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Rita Hume

Mailing Address 2555 County Road 13A S.

City State Zip Code
Elkton FL 32033-2719

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Concrete Conservative Inc Bookkeeper

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01809

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

895.00

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 610 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Miss Cynthia E. Humphreys

Mailing Address 1347 LaMar Square Drive
Apartment 203

City Austin State TX Zip Code 78704-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01810

Amount of Each Receipt this Period
45.00

B.

Full Name (Last, First, Middle Initial)
Miss Cynthia E. Humphreys

Mailing Address 1347 LaMar Square Drive
Apartment 203

City Austin State TX Zip Code 78704-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai01811

Amount of Each Receipt this Period
45.00

C.

Full Name (Last, First, Middle Initial)
Miss Cynthia E. Humphreys

Mailing Address 1347 LaMar Square Drive
Apartment 203

City Austin State TX Zip Code 78704-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01812

Amount of Each Receipt this Period
45.00

SUBTOTAL of Receipts This Page (optional) ► **135.00**

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 611 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Ivan H. Humphreys	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 1729 Middlefield Road	Transaction ID: 2009M04L11ai01813
	City Palo Alto State CA Zip Code 94301-3822	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Wilson Sonsini Goodrich & Rosa	Occupation Lawyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mary & James Hunt	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 609 Mountain View Dr.	Transaction ID: 2009M04L11ai01814
	City Mesquite State NV Zip Code 89027-2543	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Melvin H. Hunter	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address P.O. Box 178	Transaction ID: 2009M04L11ai01815
	City New Milford State PA Zip Code 18834-0178	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Snake & Creek Marine	Occupation Custom Fabricator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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 612 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
L. C. Huntley
Mailing Address 1645 San Pablo Drive
City Lake San Marcos State CA Zip Code 92069
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai01816
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Fred Hunzeker
Mailing Address 11758 Nicholas Street
City Omaha State NE Zip Code 68154-4413
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00
Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai01817
Amount of Each Receipt this Period 2500.00

C. Full Name (Last, First, Middle Initial)
Mr. Millard Hurlburt
Mailing Address 1301 County Highway 48
City Oneonta State NY Zip Code 13820-4305
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai01818
Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 2950.00
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 613 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. & Mrs. Raymond & Eunice Hurm

Mailing Address 7011 N. Wilder Road

City State Zip Code
Phoenix AZ 85021-8756

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01819

Amount of Each Receipt this Period
240.00

B. Full Name (Last, First, Middle Initial)
Mr. Francis Huss

Mailing Address 41 Lake Forest Lane

City State Zip Code
Saint Charles MO 63301-8716

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01820

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Dr. Richard W. Huss

Mailing Address 8616 Aqueduct Road

City State Zip Code
Potomac MD 20854-6249

FEC ID number of contributing federal political committee. **C**

Name of Employer E.M.T.H.H. Care Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01821

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **790.00**

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 614 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Vernon F. Hutchens

Mailing Address 302 Westburg Avenue S.W.

City State Zip Code
Huntsville AL 35801-3327

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2009

Transaction ID: 2009M04L11ai01822

Amount of Each Receipt this Period
70.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Vernon F. Hutchens

Mailing Address 302 Westburg Avenue S.W.

City State Zip Code
Huntsville AL 35801-3327

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai01823

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Charles R. Hutchinson

Mailing Address 8502 Da Costa Street

City State Zip Code
Downey CA 90240-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai01824

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **320.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 615 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
The Hon. Tzu Y. Hwang

Mailing Address 11768 Roseglen Street

City State Zip Code
El Monte CA 91732-1446

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai01825

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
The Hon. Tzu Y. Hwang

Mailing Address 11768 Roseglen Street

City State Zip Code
El Monte CA 91732-1446

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01826

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Paul E. Hyams

Mailing Address 3833 W. Dallas Street

City State Zip Code
Broken Arrow OK 74012-4539

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01827

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **350.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 616 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
W. B. Hyde

Mailing Address 4715 - 133rd Street N. W.

City State Zip Code
Gig Harbor WA 98332-8887

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 850.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai01828

Amount of Each Receipt this Period
850.00

B.

Full Name (Last, First, Middle Initial)
Mr. John Hyland, III

Mailing Address 499 Hunt Ln

City State Zip Code
Manhasset NY 11030-2641

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai01829

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bill Ihrig

Mailing Address 202 North Avenue
P.M.B. 310

City State Zip Code
Grand Junction CO 81501-7540

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai01830

Amount of Each Receipt this Period
210.00

SUBTOTAL of Receipts This Page (optional) ► **1310.00**

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 617 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Catherine Inbar

Mailing Address 677 Lakeview Canyon Road

City State Zip Code
Westlake Village CA 91362-5601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01831

Amount of Each Receipt this Period
220.00

B. Full Name (Last, First, Middle Initial)
Mr. Russell S. Inboden

Mailing Address 2635 Robert Oliver Avenue

City State Zip Code
Fernandina Beach FL 32034-6010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01832

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. James Infinger

Mailing Address 141 Deep Woods Rd

City State Zip Code
Saint George SC 29477-8708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01833

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **720.00**

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 618 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Donald Ingersoll

Mailing Address 1014 County Line Road

City State Zip Code
Batesville IN 47006-9009

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	9

Transaction ID: 2009M04L11ai01834

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald Ingersoll

Mailing Address 1014 County Line Road

City State Zip Code
Batesville IN 47006-9009

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: 2009M04L11ai01835

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Mr. James Inglis

Mailing Address 300 International Parkway

City State Zip Code
Sunrise FL 33325-6240

FEC ID number of contributing federal political committee. **C**

Name of Employer Hydraulic Supply Co. Occupation Ceo

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: 2009M04L11ai01836

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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 619 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Diane Ingold
Mailing Address 373 Harvest Run
City State Zip Code
Mc Donough GA 30252-4048
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Henry County Board Of Education Educator
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 05 / 2009
Transaction ID: 2009M04L11ai01837
Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Peter A. Iovino
Mailing Address 1823 Solitaire Lane
City State Zip Code
Mc Lean VA 22101-4235
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self Lawyer
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2009
Transaction ID: 2009M04L11ai01838
Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald L. Irvin
Mailing Address 24 Clouser Court
City State Zip Code
Martinsburg WV 25405-7581
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 05 / 2009
Transaction ID: 2009M04L11ai01839
Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00
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 620 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Phillip D Irwin

Mailing Address **586 Rio Verde Lane**

City **Grand Junction** State **CO** Zip Code **81507-1236**

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation **Ret.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01840

Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Mr. Phillip D Irwin

Mailing Address **586 Rio Verde Lane**

City **Grand Junction** State **CO** Zip Code **81507-1236**

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation **Ret.**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01841

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Darrel C. Isaak

Mailing Address **4597 Road 6.5 N.E.**

City **Moses Lake** State **WA** Zip Code **98837-8933**

FEC ID number of contributing federal political committee. C

Name of Employer Requested Occupation **Requested**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01842

Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) 425.00

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 621 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Craig Iseli

Mailing Address 209 Forest Avenue

City State Zip Code
Oak Park IL 60302-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01843

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Brett Ison

Mailing Address 1085 Spring Br.

City State Zip Code
Jeremiah KY 41826-8806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unison Insurance Group, Inc Insurance Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01844

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Curtis B. Jackson

Mailing Address P.O. Box 148

City State Zip Code
Goldsboro NC 27533-0148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01845

Amount of Each Receipt this Period
375.00

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: (check only one)	PAGE 622 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Marilyn L. Jackson		Date of Receipt
	Mailing Address 11501 SE Skyline Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	Santa Ana	CA	92705-2400
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01846
Name of Employer Self		Occupation Owner Escrow Company	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) Mr. Phil Jackson		Date of Receipt
	Mailing Address 5181 N. Corral Canyon Place		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 12 / 2009
	City	State	Zip Code
	Tucson	AZ	85749-4980
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01847
Name of Employer J-Com, Inc.		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) Mr. Philip K. Jackson		Date of Receipt
	Mailing Address 21804 Deer Pointe Xing		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2009
	City	State	Zip Code
	Bradenton	FL	34202-6302
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01848
Name of Employer Bechtel Jacobs Company L.-L.C.		Occupation Project Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	<input type="text"/> 100.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 850.00
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 623 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Philip K. Jackson

Mailing Address 21804 Deer Pointe Xing

City State Zip Code
Bradenton FL 34202-6302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bechtel Jacobs Company L.- L.C. Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01849

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Philip K. Jackson

Mailing Address 21804 Deer Pointe Xing

City State Zip Code
Bradenton FL 34202-6302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bechtel Jacobs Company L.- L.C. Project Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01850

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Dr. Robert E. Jackson, III

Mailing Address 4205 Palacio Drive

City State Zip Code
Amarillo TX 79109-5027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Amarillo Heart Group Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 345.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01851

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 624 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Leonard Jacob

Mailing Address 35 Great Hill Road

City State Zip Code
Kennebunk ME 04043-7402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai01852

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Herbert A. Jacobi

Mailing Address 234 Palmo Way

City State Zip Code
Palm Beach FL 33480-3135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01853

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Herbert A. Jacobi

Mailing Address 234 Palmo Way

City State Zip Code
Palm Beach FL 33480-3135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai01854

Amount of Each Receipt this Period
200.00

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 625 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Michael Jacobs

Mailing Address 8622 Braddock Ave

City State Zip Code
Alexandria VA 22309-2021

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01855

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael Jacobs

Mailing Address 8622 Braddock Ave

City State Zip Code
Alexandria VA 22309-2021

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 3 / 2 0 0 9

Transaction ID: 2009M04L11ai01856

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Erik A. Jacobson

Mailing Address 301 Lenox Avenue
Apartment 307

City State Zip Code
Oakland CA 94610-4617

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 0 9

Transaction ID: 2009M04L11ai01857

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ▶

180.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 626 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Erik A. Jacobson

Mailing Address 301 Lenox Avenue
Apartment 307

City State Zip Code
Oakland CA 94610-4617

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01858

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Mr. Erik A. Jacobson

Mailing Address 301 Lenox Avenue
Apartment 307

City State Zip Code
Oakland CA 94610-4617

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai01859

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Mr. Erik A. Jacobson

Mailing Address 301 Lenox Avenue
Apartment 307

City State Zip Code
Oakland CA 94610-4617

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01860

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **80.00**

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 627 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard P. Jahnke

Mailing Address 1002 Hawthorn Drive

City State Zip Code
Waukesha WI 53188-2958

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai01861

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Lois F. Jaillot

Mailing Address P.O. Box 1600

City State Zip Code
Berclair TX 78107-0002

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai01862

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Mr. Stanley Jaksina

Mailing Address 480 Metacom Avenue

City State Zip Code
Bristol RI 02809-5119

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01863

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 628 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. R. Bryan Jamar

Mailing Address P.O. Box 9263

City State Zip Code
Santa Rosa CA 95405-1263

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01864

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. R. Bryan Jamar

Mailing Address P.O. Box 9263

City State Zip Code
Santa Rosa CA 95405-1263

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01865

Amount of Each Receipt this Period
110.00

C.

Full Name (Last, First, Middle Initial)
Dr. Kenneth James

Mailing Address 706 Willington Square Way

City State Zip Code
Newark DE 19711-4138

FEC ID number of contributing federal political committee. **C**

Name of Employer Sft Inc. Occupation Chemist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai01866

Amount of Each Receipt this Period
150.00

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 629 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Kenneth James

Mailing Address 706 Willington Square Way

City State Zip Code
Newark DE 19711-4138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sft Inc. Chemist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01867

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Stephan A. James

Mailing Address 3030 Cliff Overlook

City State Zip Code
Spicewood TX 78669-7506

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai01868

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey Janakus

Mailing Address 10461 Warwick Falls Court

City State Zip Code
Las Vegas NV 89144-1398

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Station Casinos, Inc. Design & Construction Owners R

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01869

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1400.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 630 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Vladislav Jankulov

Mailing Address 44505 White Pine Circle E.

City Northville State MI Zip Code 48168-4352

FEC ID number of contributing federal political committee. **C**

Name of Employer Drs. HBWS, P.C. Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai01870
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Edward L. Jaroski

Mailing Address 3127 Noble Lakes Lane

City Houston State TX Zip Code 77082-6810

FEC ID number of contributing federal political committee. **C**

Name of Employer Capstone Occupation Investment Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 17 / 2009
Transaction ID: 2009M04L11ai01871
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Dr. Todd S. Jarrell

Mailing Address 6901 Hilltop Court

City Columbus State GA Zip Code 31904-2287

FEC ID number of contributing federal political committee. **C**

Name of Employer Urology Associates Of Columbus Occupation Medical Doctor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai01872
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 631 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Robert & Doreen Jaudes

Mailing Address 231 Fox Chapel Lane

City State Zip Code
Chesterfield MO 63005-6905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai01873

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Stephen Jehle

Mailing Address 7726 Visonary Court

City State Zip Code
Manassas VA 20112-7533

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
P&J Arcomet, Llc. Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai01874

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Kent C. Jenkins

Mailing Address 3607 Everest Court

City State Zip Code
Montgomery AL 36106-3342

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai01875

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 632 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Alvin K. Jennings

Mailing Address 1221 N.W. 50Th Road

City State Zip Code
Holden MO 64040-9385

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01876

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
Mr. Raymond Jennings

Mailing Address 366 Oak Drive

City State Zip Code
Arnold MD 21012-1068

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01877

Amount of Each Receipt this Period
310.00

C. Full Name (Last, First, Middle Initial)
Mrs. Charlotte E. Jensen

Mailing Address 178 Wildwood Bay Drive

City State Zip Code
Mahtomedi MN 55115-1443

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01878

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **720.00**

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 633 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Evelyn Jensen

Mailing Address P.O. Box 530335

City Harlingen State TX Zip Code 78553-0335

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 27 / 2009

Transaction ID: 2009M04L11ai01879

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mary Jean Jensen

Mailing Address 1701 Auburn Lakes Drive

City Venice State FL Zip Code 34292

FEC ID number of contributing federal political committee. **C**

Name of Employer Evanson-Jensen Funeral Homes Occupation Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai01880

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Stanley Jensen

Mailing Address 300 Lightning Ranch Rd.

City Georgetown State TX Zip Code 78628-6856

FEC ID number of contributing federal political committee. **C**

Name of Employer lbn Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai01881

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 634 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Admiral & David E. Jeremiah

Mailing Address 2890 Melanie Lane

City State Zip Code
Oakton VA 22124-1809

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai01882
Amount of Each Receipt this Period: 600.00

B. Full Name (Last, First, Middle Initial)
Mr. James Jessen

Mailing Address 10113 Pinnacle View Pl.

City State Zip Code
Las Vegas NV 89134-2553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Omicrow Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 04 / 2009
Transaction ID: 2009M04L11ai01883
Amount of Each Receipt this Period: 110.00

C. Full Name (Last, First, Middle Initial)
Mr. Bruce Jett

Mailing Address 7833 Surfcrest Court

City State Zip Code
Las Vegas NV 89128-6808

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai01884
Amount of Each Receipt this Period: 220.00

SUBTOTAL of Receipts This Page (optional) ► 930.00

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 635 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Felix Jimenez

Mailing Address 6423 E. MacClaurin Drive

City Tampa State FL Zip Code 33647-1171

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai01885
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Courtney John

Mailing Address 2135 Seminole Road

City Atlantic Beach State FL Zip Code 32233-5921

FEC ID number of contributing federal political committee. **C**

Name of Employer Horizon Lines Occupation Marine Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai01886
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Alex J. Johnson

Mailing Address 6102 Harvester Court

City Burke State VA Zip Code 22015-3235

FEC ID number of contributing federal political committee. **C**

Name of Employer Jb Management, Inc. Occupation C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai01887
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 636 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Alice Johnson

Mailing Address P.O. Box 3829

City State Zip Code
Orlando FL 32802-3829

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
One Source Roofing, Inc Small Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01888

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Alice M. Johnson

Mailing Address 5990 Camino De La Costa

City State Zip Code
La Jolla CA 92037-6550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01889

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Arnold S. Johnson

Mailing Address 8610 Birchwood Hills Rd.

City State Zip Code
Lake Shore MN 56468-2509

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01890

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ▶ 2250.00

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 637 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Aubrey K. Johnson

Mailing Address P.O. Box 5047

City State Zip Code
Sun City West AZ 85376-5047

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01891

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Dr. Charles T. Johnson

Mailing Address 263 Sunnybrook Lane

City State Zip Code
El Dorado AR 71730-8595

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01892

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Clarence Johnson

Mailing Address 148 5Th Avenue N.

City State Zip Code
Franklin TN 37064-2606

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01893

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 638 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Craig A. Johnson

Mailing Address 9670 Falls Of Rough Road

City Falls Rough State KY Zip Code 40119-6844

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 03 / 05 / 2009
Transaction ID: 2009M04L11ai01894
Amount of Each Receipt this Period: 105.00

B. Full Name (Last, First, Middle Initial)
Mr. Damon Johnson

Mailing Address 3501 N. Coltrane Road

City Edmond State OK Zip Code 73034-8356

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai01895
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Dolores C. Johnson

Mailing Address 5803 Seashore Drive

City Newport Beach State CA Zip Code 92663-2027

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: 2009M04L11ai01896
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 655.00

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 639 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Franklin Johnson

Mailing Address 151 E. Pike Rd

City State Zip Code
Falkville AL 35622

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai01897

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Glen Johnson

Mailing Address 122 San Benito Avenue

City State Zip Code
Aptos CA 95003-4415

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: 2009M04L11ai01898

Amount of Each Receipt this Period
750.00

C.

Full Name (Last, First, Middle Initial)
Mr. James Johnson

Mailing Address 117 Colesbury Drive

City State Zip Code
New Castle DE 19720-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai01899

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

1250.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 640 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Johnny Johnson

Mailing Address 1249 N. Lavergne Avenue

City State Zip Code
Chicago IL 60651-1553

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation
Self Employed Small Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai01900

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. Johnny Johnson

Mailing Address 1249 N. Lavergne Avenue

City State Zip Code
Chicago IL 60651-1553

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation
Self Employed Small Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai01901

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mrs. Kathleen Johnson

Mailing Address 5607 Pine Arbor Drive

City State Zip Code
Houston TX 77066-2434

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai01902

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **300.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 641 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Leonard Johnson

Mailing Address 1562 East 3Rd Street

City State Zip Code
Moscow ID 83843-3791

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 9

Transaction ID: 2009M04L11ai01903

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Linda Johnson

Mailing Address 100 Street Of Dreams

City State Zip Code
Village Of Loch LI MO 64012

FEC ID number of contributing federal political committee. **C**

Name of Employer Business Solutions Networ-
k, In Occupation President & Ceo

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai01904

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Linnea K. Johnson

Mailing Address 1781 Taylorsville Rd

City State Zip Code
Taylorsville GA 30178-1602

FEC ID number of contributing federal political committee. **C**

Name of Employer Janus Intl Occupation Sales

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai01905

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 642 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Madolyn Johnson
Mailing Address P.O. Box 428
City Itasca State IL Zip Code 60143-1974
FEC ID number of contributing federal political committee. **C**
Name of Employer Wicker World Enterprises, Inc. Occupation Chief Executive Officer
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai01906
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark W. Johnson
Mailing Address 66 Smokestone Drive
City The Woodlands State TX Zip Code 77381-3820
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai01907
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Marlin William Johnson
Mailing Address 1574 Elm Street
City San Carlos State CA Zip Code 94070-4944
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai01908
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 800.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 643 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Marlin William Johnson

Mailing Address 1574 Elm Street

City San Carlos State CA Zip Code 94070-4944

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai01909

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Patricia Ann Johnson

Mailing Address 1510 Braiden Rd.

City Dalton State GA Zip Code 30720-5104

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai01910

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul A. Johnson

Mailing Address 2006 Daisy Lane

City Jefferson City State MO Zip Code 65109-1810

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai01911

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00

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 644 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Warren Johnson

Mailing Address 8502 N. 94Th Avenue

City State Zip Code
Peoria AZ 85345-7702

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Paradise Valley Family Me- Physician
dicin

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 1 / 2 0 0 9

Transaction ID: 2009M04L11ai01912

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Col. William R. Johnson

Mailing Address 5103 Redwing Drive

City State Zip Code
Alexandria VA 22312-2044

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
General Dynamics Contract Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: 2009M04L11ai01913

Amount of Each Receipt this Period
220.00

C.

Full Name (Last, First, Middle Initial)
Ms. Wilma Johnson

Mailing Address 1342 W. Laurel Road

City State Zip Code
London KY 40741-8209

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai01914

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

570.00

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 645 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Kenneth Johnston
Mailing Address 8203 Glenn Elm Drive
City State Zip Code
Spring TX 77379-2733
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Jnet It Services Owner
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y
03 / 19 / 2009
Transaction ID: 2009M04L11ai01915
Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Roger M. Johnston
Mailing Address 2028 Knollshire Rd. NE
City State Zip Code
Cedar Rapids IA 52402-2861
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
None Ret.
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2009
Transaction ID: 2009M04L11ai01916
Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Bryan L. Jones
Mailing Address 19175 Industrial Boulevard #A
City State Zip Code
Elk River MN 55330-2455
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
S.M.I. Business
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2009
Transaction ID: 2009M04L11ai01917
Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 646 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles Jones

Mailing Address P.O. Box 417

City Marshall State TX Zip Code 75671-0417

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 19 / 2009

Transaction ID: 2009M04L11ai01918

Amount of Each Receipt this Period 110.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles W. Jones

Mailing Address 993 Baumann Dr. N.

City Floyd's Knobs State IN Zip Code 47119-8834

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai01919

Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Douglas W Jones

Mailing Address 26477 Rancho Parkway South

City Lake Forest State CA Zip Code 92630-8326

FEC ID number of contributing federal political committee. **C**

Name of Employer Jones Associates Occupation Financial Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai01920

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ **510.00**

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 647 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Elton Jones

Mailing Address 3797 Longhorn Drive

City State Zip Code
Hamilton OH 45013-8426

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	9

Transaction ID: 2009M04L11ai01921

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Elton Jones

Mailing Address 3797 Longhorn Drive

City State Zip Code
Hamilton OH 45013-8426

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	0	9

Transaction ID: 2009M04L11ai01922

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Gary Jones

Mailing Address 159 Horns Ford Lane

City State Zip Code
Ocoee TN 37361-3426

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 550.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai01923

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 648 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Gary Jones

Mailing Address 159 Horns Ford Lane

City State Zip Code
Ocoee TN 37361-3426

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01924

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. H.L. Dick Jones

Mailing Address 1004 Lake Winds Drive

City State Zip Code
Birmingham AL 35244-3243

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01925

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Hoyle C. Jones

Mailing Address P.O. Box 169

City State Zip Code
Mill Neck NY 11765-0169

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01926

Amount of Each Receipt this Period
300.00

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 649 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Irene Jones		Date of Receipt MM / DD / YYYY 03 / 02 / 2009		
	Mailing Address 2137 Hidden Creek Road		Transaction ID: 2009M04L11ai01927		
	City Forth Worth	State TX	Zip Code 76107-3563	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested	Occupation Requested		Aggregate Year-to-Date 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Mr. Jenk Jones, Jr.		Date of Receipt MM / DD / YYYY 03 / 30 / 2009		
	Mailing Address 6447 S. Louisville Avenue		Transaction ID: 2009M04L11ai01928		
	City Tulsa	State OK	Zip Code 74136-1532	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired		Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Mr. Jerry W. Jones		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address 703 Glenbrook Dr.		Transaction ID: 2009M04L11ai01929		
	City Middletown	State MD	Zip Code 21769-7753	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer I.B.M. Corporation	Occupation Sales Manager		Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

SUBTOTAL of Receipts This Page (optional) ▶

800.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 650 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Luther Jones

Mailing Address 50 Kahdena Road

City State Zip Code
Morristown NJ 07960-3523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sonneborn, Inc. Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01930

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Mary Jones

Mailing Address 25306 Fawn Point Ct.

City State Zip Code
Spring TX 77389-3892

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01931

Amount of Each Receipt this Period
125.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary Jones

Mailing Address 25306 Fawn Point Ct.

City State Zip Code
Spring TX 77389-3892

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01932

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **475.00**

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 651 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Mary V. Jones

Mailing Address 120 Heritage Pointe

City State Zip Code
Morgantown WV 26505-2830

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01933

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Mr. Oakah L. Jones

Mailing Address 1435 Wagon Train Drive S.E.

City State Zip Code
Albuquerque NM 87123-4299

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **285.00**

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai01934

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Mrs. Patricia L. Jones

Mailing Address 1705 Mason Hill Drive

City State Zip Code
Alexandria VA 22307-1932

FEC ID number of contributing federal political committee. **C**

Name of Employer Inova Health System Occupation Hospital Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai01935

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **640.00**

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 652 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Paul L. Jones

Mailing Address 2209 Delaware Drive

City Ann Arbor State MI Zip Code 48103-6150

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01936

Amount of Each Receipt this Period
140.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul L. Jones

Mailing Address 2209 Delaware Drive

City Ann Arbor State MI Zip Code 48103-6150

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai01937

Amount of Each Receipt this Period
140.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert M. Jones

Mailing Address 9219 Appolds Road

City Rocky Ridge State MD Zip Code 21778-9223

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai01938

Amount of Each Receipt this Period
250.00

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 653 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Vivian Jones

Mailing Address 903 Brentwood Drive

City State Zip Code
Etowah TN 37331-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01939

Amount of Each Receipt this Period
180.00

B. Full Name (Last, First, Middle Initial)
Ms. Vivian Jones

Mailing Address 903 Brentwood Drive

City State Zip Code
Etowah TN 37331-1802

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01940

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Mr. William Jones

Mailing Address 1618 Buschong St.

City State Zip Code
Houston TX 77039-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Raven Mechanical Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01941

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 654 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. William Jones	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 1734 Stone Hollow Court	Transaction ID: 2009M04L11ai01942
	City State Zip Code Bountiful UT 84010-1070	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00

B.	Full Name (Last, First, Middle Initial) Mr. William Jones	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 1734 Stone Hollow Court	Transaction ID: 2009M04L11ai01943
	City State Zip Code Bountiful UT 84010-1070	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00

C.	Full Name (Last, First, Middle Initial) Mr. Howell Jones Jr.	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address P.O. Box 40	Transaction ID: 2009M04L11ai01944
	City State Zip Code Sheldon SC 29941-0040	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 655 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Chalmer Jordan
Mailing Address P.O. Box 575
City State Zip Code
Saegertown PA 16433-0828
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Saegertown Manufacturing Ceo
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai01945
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. J. R. Jordan
Mailing Address 3104 West U.S. Highway 86
City State Zip Code
Brawley CA 92227-9608
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai01946
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Kara Jordan
Mailing Address 119 Willow Springs Lane
City State Zip Code
Aledo TX 76008-2767
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Homemaker Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai01947
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 850.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 656 / 1945

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Pendleton A. Jordan, III

Mailing Address 6391 Phillip Court

City State Zip Code
Springfield VA 22152-2844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01948

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard E. Jordan, II

Mailing Address 4 Foxtail Court

City State Zip Code
Mechanicsburg PA 17050-8501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Smith Land & Improvement Corporation C.E.O.

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai01949

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Tom N. Jordan, Jr.

Mailing Address P.O. Box 1919

City State Zip Code
Healdsburg CA 95448-1919

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Jordan Oil & Gas Company President

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 15000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai01950

Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional)

15550.00

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 657 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Dan Jorndt	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 1038 Cayuga Drive	Transaction ID: 2009M04L11ai01951
	City State Zip Code Northbrook IL 60062-4306	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

B.	Full Name (Last, First, Middle Initial) Mr. George Joseph	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 365 S. Hudson Avenue	Transaction ID: 2009M04L11ai01952
	City State Zip Code Los Angeles CA 90020-4803	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Mercury Insurance Group Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

C.	Full Name (Last, First, Middle Initial) Mr. Kenneth L. Josselyn	Date of Receipt MM / DD / YYYY 03 / 04 / 2009
	Mailing Address 250 E. 87Th Street Apartment 9C	Transaction ID: 2009M04L11ai01953
	City State Zip Code New York NY 10128-3159	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Goldman, Sachs & Co. Occupation Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

SUBTOTAL of Receipts This Page (optional)	6500.00
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 658 / 1945
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Joe Joyce

Mailing Address 3 Thorntree

City State Zip Code
 Longview TX 75601-4797

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2009

Transaction ID: 2009M04L11ai01954

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Clara M. Judy

Mailing Address 5591 U.S. Hwy 27 S.

City State Zip Code
 Cynthiana KY 41031-7426

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2009

Transaction ID: 2009M04L11ai01955

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Mr. John Juhasz

Mailing Address 1540 Calais Dr.

City State Zip Code
 Miami Beach FL 33141-3509

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2009

Transaction ID: 2009M04L11ai01956

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: PAGE 659 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Jerry G Jumper

Mailing Address 13509 Bullion Ct

City State Zip Code
Corpus Christi TX 78418-6907

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai01957

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Janeen Jydstруп

Mailing Address P.O. Box 281

City State Zip Code
Bay Center WA 98527-0281

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
330.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai01958

Amount of Each Receipt this Period
330.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Evelyn & John Kafura

Mailing Address 5275 Chesapeake Court

City State Zip Code
Oshkosh WI 54901-1334

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01959

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **830.00**

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 661 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Richard J. Kaley		Date of Receipt MM / DD / YYYY 03 / 06 / 2009
Mailing Address 65 Columbus Avenue Apartment 310		Transaction ID: 2009M04L11ai01963
City Pittsfield	State MA	Zip Code 01201-5094
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.00
Name of Employer Self-Employed	Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	

B.

Full Name (Last, First, Middle Initial) Mr. Richard J. Kaley		Date of Receipt MM / DD / YYYY 03 / 20 / 2009
Mailing Address 65 Columbus Avenue Apartment 310		Transaction ID: 2009M04L11ai01964
City Pittsfield	State MA	Zip Code 01201-5094
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.00
Name of Employer Self-Employed	Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00	

C.

Full Name (Last, First, Middle Initial) Mr. & Mrs. Robert J. Kalina		Date of Receipt MM / DD / YYYY 03 / 27 / 2009
Mailing Address 106 Mohawk Circle		Transaction ID: 2009M04L11ai01965
City Lake Kiowa	State TX	Zip Code 76240-9067
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	▶	61.00
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 662 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) William Kaman	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 915 Beachside Ln	Transaction ID: 2009M04L11ai01966
	City State Zip Code Huron OH 44839-1958	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Matrix Automation Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jeffrey M. Kammerer	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 300 Windlake Ct.	Transaction ID: 2009M04L11ai01967
	City State Zip Code Alpharetta GA 30022-3238	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Pricewaterhousecoopers Occupation Public Accountant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Ms. Helen Kamp	Date of Receipt MM / DD / YYYY 03 / 18 / 2009
	Mailing Address 1835 Michigan Street NE #2	Transaction ID: 2009M04L11ai01968
	City State Zip Code Grand Rapids MI 49503-2108	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	1540.00
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 663 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert E. Kandoll

Mailing Address 3158 Garfield Street

City State Zip Code
Longview WA 98632-2754

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01969

Amount of Each Receipt this Period
80.00

B. Full Name (Last, First, Middle Initial)
Dr. Martin Kane

Mailing Address 211 Everit Avenue

City State Zip Code
Hewlett NY 11557-2209

FEC ID number of contributing federal political committee. **C**

Name of Employer Healthplex Occupation Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01970

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. J. David Karam

Mailing Address 2380 Onandaga Drive

City State Zip Code
Columbus OH 43221-3618

FEC ID number of contributing federal political committee. **C**

Name of Employer Cedar Enterprises, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai01971

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1180.00**

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 664 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. J. David Karam

Mailing Address 2380 Onandaga Drive

City Columbus State OH Zip Code 43221-3618

FEC ID number of contributing federal political committee. **C**

Name of Employer Cedar Enterprises, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai01972

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Dr. Stephen M. Karlovits

Mailing Address 100 Maplewood Drive

City Wexford State PA Zip Code 15090-8560

FEC ID number of contributing federal political committee. **C**

Name of Employer Allegheny General Hospital Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai01973

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Roger Karsten

Mailing Address P.O. Box 3326

City Carbondale State IL Zip Code 62902-3326

FEC ID number of contributing federal political committee. **C**

Name of Employer Simco Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai01974

Amount of Each Receipt this Period 2000.00

SUBTOTAL of Receipts This Page (optional) ► 2350.00

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 665 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Mary B. Kasbohm

Mailing Address 149 Fleetwood Terrace

City State Zip Code
Williamsville NY 14221-4469

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01975

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Mary B. Kasbohm

Mailing Address 149 Fleetwood Terrace

City State Zip Code
Williamsville NY 14221-4469

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai01976

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Duke Kassolis

Mailing Address 1436 Gormican Lane

City State Zip Code
Naples FL 34110-0935

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01977

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: PAGE 666 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Nick Katradis
Mailing Address 107 Buckingham Road
City Tenafly State NJ Zip Code 07670-3103
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai01978
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Ms. Vickie Kaufman
Mailing Address 2730 San Miguel Way
City San Carlos State CA Zip Code 94070-3609
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai01979
Amount of Each Receipt this Period 225.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Wayne C. Kaufmann
Mailing Address 841 Kingsgate Drive
City O. Fallon State MO Zip Code 63368-4799
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai01980
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1725.00
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 667 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert Keating		Date of Receipt
	Mailing Address 6709 N. Classen Boulevard		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Oklahoma City	OK	73116-7308
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01981
Name of Employer Topographic, Inc.		Occupation Chief Executive Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 375.00	125.00

B.	Full Name (Last, First, Middle Initial) Mr. Matt Keeley		Date of Receipt
	Mailing Address 564 Mayfair Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 05 / 2009
	City	State	Zip Code
	Naperville	IL	60565-5387
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01982
Name of Employer Caterpillar Inc		Occupation Operations Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	250.00

C.	Full Name (Last, First, Middle Initial) Mr. Joseph S. Keely		Date of Receipt
	Mailing Address P.O. Box 134		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2009
	City	State	Zip Code
	Stevenson	MD	21153
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai01983
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	2500.00

SUBTOTAL of Receipts This Page (optional)	2875.00
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 668 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Daniel Keh

Mailing Address 99 John St Apt 1014

City State Zip Code
New York NY 10038

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Marathon Asset Management Finance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01984

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Alan R. Keith

Mailing Address 904 Sea Girt Avenue

City State Zip Code
Sea Girt NJ 08750-1932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
National Electric Wire Co-mpany, Inc. General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01985

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Alan R. Keith

Mailing Address 904 Sea Girt Avenue

City State Zip Code
Sea Girt NJ 08750-1932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
National Electric Wire Co-mpany, Inc. General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01986

Amount of Each Receipt this Period
200.00

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: (check only one)	PAGE 669 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Thomas E. Keller	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 22798 River Chase Lane	Transaction ID: 2009M04L11ai01987
	City State Zip Code Defiance OH 43512-6871	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Ms. Merry Kelley	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 220 S. Blairsferry Crossing	Transaction ID: 2009M04L11ai01988
	City State Zip Code Hiawatha IA 52233-7947	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

C.	Full Name (Last, First, Middle Initial) Jack L. & Beatrice L Kellogg	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 890 Vernon Heights Blvd.	Transaction ID: 2009M04L11ai01989
	City State Zip Code Marion OH 43302-5383	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

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 670 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Colin P. Kelly

Mailing Address 840 Appletree Lane

City State Zip Code
Glenview IL 60025-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai01990

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr. Donald S. Kelly

Mailing Address 29 Amsterdam Rd.

City State Zip Code
Grove City PA 16127-3401

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01991

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph Kelly

Mailing Address 2440 Bethel Road

City State Zip Code
Liberty MS 39645-8182

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai01992

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 671 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Larry Kelly

Mailing Address 3314 Roosevelt Drive

City State Zip Code
Arlington TX 76016-6011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mid-States Energy Coo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai01993

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas E. Kelly

Mailing Address The Highlands

City State Zip Code
Shoreline WA 98177-5004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai01994

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas L. Kelly

Mailing Address 2500 Ok Highway 78 E.

City State Zip Code
Tishomingo OK 73460-4905

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 485.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai01995

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ► **385.00**

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 672 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Jack Kelso

Mailing Address 1309 Mount Vernon Street

City Ennis State TX Zip Code 75119-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt MM / DD / YYYY 03 / 23 / 2009

Transaction ID: 2009M04L11ai01996

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert D. Kemp

Mailing Address 4503 N. Lakewood Drive

City Saint Joseph State MO Zip Code 64506-4505

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY 03 / 26 / 2009

Transaction ID: 2009M04L11ai01997

Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Dean M. Kennedy, III

Mailing Address 1004 S. Sierra Vista Ave

City Alhambra State CA Zip Code 91801-4818

FEC ID number of contributing federal political committee. **C**

Name of Employer Consona Erp Inc Occupation Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY 03 / 06 / 2009

Transaction ID: 2009M04L11ai01998

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 673 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dean M. Kennedy, III

Mailing Address 1004 S Sierra Vista Ave

City State Zip Code
Alhambra CA 91801-4818

FEC ID number of contributing federal political committee. **C**

Name of Employer Rbs, Inc Occupation Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai01999

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. John P. Kennedy

Mailing Address 1832 Turkeyfoot Lake Rd # W.

City State Zip Code
Barberton OH 44203-4801

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02000

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Joseph P. Kennedy

Mailing Address 404 Clinton Road

City State Zip Code
Lexington KY 40502-2356

FEC ID number of contributing federal political committee. **C**

Name of Employer Kennedy Book Store Occupation Book Store Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02001

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 2950.00

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 674 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Roger B. Kennedy

Mailing Address 633 N. Longview Pl.

City Longwood State FL Zip Code 32779-6016

FEC ID number of contributing federal political committee. **C**

Name of Employer Roger Kennedy, Inc Occupation Constrction Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 16 / 2009

Transaction ID: 2009M04L11ai02002

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph F. Kennell

Mailing Address 900 W. Grand Oak Drive

City Peoria State IL Zip Code 61615-1150

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai02003

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Jerome P. Kenney

Mailing Address 1136 Fifth Avenue
Apartment 13-A

City New York State NY Zip Code 10128-0122

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai02004

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 675 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Douglas R. Kenny

Mailing Address 11414 Rustic Pine Court

City State Zip Code
Riverview FL 33569-4651

FEC ID number of contributing federal political committee. **C**

Name of Employer Precision Communcion Services
Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	0	9

Transaction ID: 2009M04L11ai02005

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Mr. Joe Kenworthy

Mailing Address 3800 W. 71st St.
Apartment 2111

City State Zip Code
Tulsa OK 74132-2154

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed
Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	0	9

Transaction ID: 2009M04L11ai02006

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Mrs. Frances M. Kenyon

Mailing Address 762 East 19Th Street

City State Zip Code
San Bernardino CA 92404-4805

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested
Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	9

Transaction ID: 2009M04L11ai02007

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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 676 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Maj Richard D. Kern, Sr.

Mailing Address 2110 Valley Avenue

City Winchester State VA Zip Code 22601-2754

FEC ID number of contributing federal political committee. **C**

Name of Employer Kern Motor Company Occupation Automobile Dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 4 / 2 0 0 9

Transaction ID: 2009M04L11ai02008

Amount of Each Receipt this Period
 100.00

B.

Full Name (Last, First, Middle Initial)
Maj Richard D. Kern, Sr.

Mailing Address 2110 Valley Avenue

City Winchester State VA Zip Code 22601-2754

FEC ID number of contributing federal political committee. **C**

Name of Employer Kern Motor Company Occupation Automobile Dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai02009

Amount of Each Receipt this Period
 100.00

C.

Full Name (Last, First, Middle Initial)
Maj Richard D. Kern, Sr.

Mailing Address 2110 Valley Avenue

City Winchester State VA Zip Code 22601-2754

FEC ID number of contributing federal political committee. **C**

Name of Employer Kern Motor Company Occupation Automobile Dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai02010

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 677 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Andrew W. Kerr

Mailing Address 1 Northwood Drive

City State Zip Code
San Francisco CA 94112-1234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rogers Benefit Group Sales Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02011

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. James W. Kerr

Mailing Address 20462 Brentstone Lane

City State Zip Code
Huntingtn Bch CA 92646-5123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Constructor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai02012

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Mary Ann. Kesicki

Mailing Address 3601 S. Ogden Street

City State Zip Code
Cherry Hills Villa CO 80113-7507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kitchen Gallery, Ltd. Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02013

Amount of Each Receipt this Period
55.00

SUBTOTAL of Receipts This Page (optional) ► **805.00**

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 678 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Mary Ann. Kesicki

Mailing Address 3601 S. Ogden Street

City State Zip Code
Cherry Hills Villa CO 80113-7507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Kitchen Gallery, Ltd. Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 305.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02014

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Ali Keskin

Mailing Address 5831 Invincible Drive

City State Zip Code
Jamesville NY 13078-9583

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Staterwire Aqua Store, Inc. Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai02015

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Margery Keskin

Mailing Address 5831 Invincible Drive

City State Zip Code
Jamesville NY 13078-9583

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J.A. Lange, Inc. Treasurer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai02016

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

550.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 679 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Merton H. Kesselring
Mailing Address P.O. Box 953
City State Zip Code
Zephyrhills FL 33539-0953
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt MM / DD / YYYY
03 / 12 / 2009
Transaction ID: 2009M04L11ai02017
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Merton H. Kesselring
Mailing Address P.O. Box 953
City State Zip Code
Zephyrhills FL 33539-0953
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt MM / DD / YYYY
03 / 13 / 2009
Transaction ID: 2009M04L11ai02018
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Alexandra L. Kieffer
Mailing Address 3013 Hawthorne Blvd.
City State Zip Code
Saint Louis MO 63104-1603
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt MM / DD / YYYY
03 / 30 / 2009
Transaction ID: 2009M04L11ai02019
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 400.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 680 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Charlene Kilgore

Mailing Address 11305 Bruce Drive

City State Zip Code
Jacksonville FL 32218-4117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02020

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Scott Killian

Mailing Address 56 Hamlin Brook Pass

City State Zip Code
Southington CT 06489-2191

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dechert Llp Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02021

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Douglas Kimmelman

Mailing Address 130 Overleigh Road

City State Zip Code
Bernardsville NJ 07924-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Energy Capital Partners Investment Fund Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02022

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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 681 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Judith Kindred
Mailing Address 10291 W. Highway 40
City Ocala State FL Zip Code 34482-2567
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02023
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert E. Kindy
Mailing Address 405 Oakhill Drive
City Conroe State TX Zip Code 77304-1903
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02024
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Fr. Brian G. King
Mailing Address 9995 N. Military Trail
City Palm Beach Gardens State FL Zip Code 33410-5460
FEC ID number of contributing federal political committee. **C**
Name of Employer Diocese Of Palm Beach Occupation Priest
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai02025
Amount of Each Receipt this Period 250.00

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 682 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Elsie M. King

Mailing Address 1721 Bannister Road

City Anchorage State AK Zip Code 99508-4020

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai02026

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. John B. King

Mailing Address 13031 Fairway Lane

City Ashland State VA Zip Code 23005-3134

FEC ID number of contributing federal political committee. **C**

Name of Employer Anicon Corporation Occupation D. O. D. Systems Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai02027

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Mitzi M. King

Mailing Address 791 Pen Shell Drive

City Sanibel State FL Zip Code 33957-4913

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai02028

Amount of Each Receipt this Period 50.00

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 683 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Stanley King		Date of Receipt MM / DD / YYYY 03 / 02 / 2009
Mailing Address 620 Petunia Road		Transaction ID: 2009M04L11ai02029
City Wytheville	State Zip Code VA 24382-1323	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 618.00
Name of Employer Self-Employed	Occupation Self-Employed	Aggregate Year-to-Date ▼ 618.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Mr. Terry King		Date of Receipt MM / DD / YYYY 03 / 27 / 2009
Mailing Address 530 Brookwood Drive		Transaction ID: 2009M04L11ai02030
City Woodway	State Zip Code TX 76712-3213	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 330.00
Name of Employer Hillcrest Baptist Hospital	Occupation Computerized Sonography Tech.	Aggregate Year-to-Date ▼ 660.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.

Full Name (Last, First, Middle Initial) Mr. Thomas D. King, Jr.		Date of Receipt MM / DD / YYYY 03 / 17 / 2009
Mailing Address P.O. Box 741		Transaction ID: 2009M04L11ai02031
City Kilauea	State Zip Code HI 96754-0741	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	1448.00
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 684 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Harry Kingsbery

Mailing Address 6350 Etheridge Lane

City Manassas State VA Zip Code 20112-8820

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai02032

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald E. Kinney

Mailing Address 3 Eagle Way

City Dedham N. State ME Zip Code 04429-1551

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai02033

Amount of Each Receipt this Period 375.00

C. Full Name (Last, First, Middle Initial)
Mr. Russell J. Kinnunen

Mailing Address 17040 Valley Rd.

City Chassell State MI Zip Code 49916-9413

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2009

Transaction ID: 2009M04L11ai02034

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **725.00**

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 685 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Leonard M. Kirk

Mailing Address 6 Hunter Drive

City State Zip Code
Bel Air MD 21014-3934

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai02035

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mr. Nathan D. Kirkes

Mailing Address 4025 Jamaica Drive

City State Zip Code
Jonesboro GA 30236-5466

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02036

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard J. Kirkpatrick

Mailing Address 1818 Berks Road

City State Zip Code
Norristown PA 19403-4818

FEC ID number of contributing federal political committee. **C**

Name of Employer Berks Ridge Co Ent Inc Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02037

Amount of Each Receipt this Period
250.00

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 686 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. James Kiser

Mailing Address P. O. Box 1799

City State Zip Code
Pawleys Isl SC 29585-1799

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 0 9

Transaction ID: 2009M04L11ai02038

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)

Mr. William I. Kissinger

Mailing Address 10155 York Road
Suite 105

City State Zip Code
Cockeysville MD 21030-3343

FEC ID number of contributing federal political committee. **C**

Name of Employer Kinninger Financial Services Occupation Financial Advisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: 2009M04L11ai02039

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)

Mr. Carl Kitchen

Mailing Address 5126 Niagara

City State Zip Code
Mount Airy MD 21771-5778

FEC ID number of contributing federal political committee. **C**

Name of Employer Bytex, Inc. Occupation Systems Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 0 9

Transaction ID: 2009M04L11ai02040

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

1600.00

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 687 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert H. Klass		Date of Receipt
	Mailing Address 420 Overview Drive N. W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 04 / 2009
	City	State	Zip Code
	Atlanta	GA	30327-4254
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02041
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 600.00	

B.	Full Name (Last, First, Middle Initial) Mr. Robert H. Klass		Date of Receipt
	Mailing Address 420 Overview Drive N. W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Atlanta	GA	30327-4254
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02042
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 600.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Martha Ann May Klaus		Date of Receipt
	Mailing Address 3 Shoreline Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 24 / 2009
	City	State	Zip Code
	Vicksburg	MS	39180-5326
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02043
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 850.00
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 688 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William E. Klawonn

Mailing Address 201 Honey Hill Drive

City Bluffton State SC Zip Code 29909-4411

FEC ID number of contributing federal political committee. C

Name of Employer Bearingpoint Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai02044
 Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert G. Kleckner, Jr.

Mailing Address 80 E. End Avenue

City New York State NY Zip Code 10028-8003

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai02045
 Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Brian Kleen

Mailing Address 1215 Noton Court

City Pflugerville State TX Zip Code 78660-3805

FEC ID number of contributing federal political committee. C

Name of Employer King Tiger Technology, Inc. Occupation Hardware Designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02046
 Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 1300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 689 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Brian Kleen

Mailing Address 1215 Noton Court

City Pflugerville State TX Zip Code 78660-3805

FEC ID number of contributing federal political committee. **C**

Name of Employer King Tiger Technology, Inc. Occupation Hardware Designer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY 03 / 27 / 2009

Transaction ID: 2009M04L11ai02047

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Bud Klein

Mailing Address 11 Atherton Island

City Stockton State CA Zip Code 95204-3806

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY 03 / 17 / 2009

Transaction ID: 2009M04L11ai02048

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles A. Klein, III

Mailing Address 2 Ivy Way

City Dayton State NJ Zip Code 08810-1420

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY 03 / 06 / 2009

Transaction ID: 2009M04L11ai02049

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 690 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ralph & Shirley Klein

Mailing Address 2101 Rock Spring Road

City State Zip Code
Forest Hill MD 21050-2617

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02050

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Rodney A. Klein

Mailing Address 2300 Bell Executive Lane

City State Zip Code
Sacramento CA 95825-4068

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02051

Amount of Each Receipt this Period
190.00

C. Full Name (Last, First, Middle Initial)
Mr. Louis A. Klemp, Jr.

Mailing Address 1816 Pine Ridge Dr.

City State Zip Code
Leavenworth KS 66048-5416

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai02052

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 690.00

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 691 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Geraldine F. Kletzker		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 3 Huntleigh Woods		Transaction ID: 2009M04L11ai02053		
	City Saint Louis	State MO	Zip Code 63131-4818	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Homemaker	Occupation Homemaker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Michael G. Kline		Date of Receipt MM / DD / YYYY 03 / 31 / 2009		
	Mailing Address P.O. Box 8068		Transaction ID: 2009M04L11ai02054		
	City Pine Bluff	State AR	Zip Code 71611-8068	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation Self-Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Mr. John Klingenstein		Date of Receipt MM / DD / YYYY 03 / 27 / 2009		
	Mailing Address 8 Fox Fun Lane		Transaction ID: 2009M04L11ai02055		
	City Greenwich	State CT	Zip Code 06831-3736	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Wertheim & Company	Occupation Banker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

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 692 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. & Mrs. Douglas Klions

Mailing Address 1108 Chauncer Drive

City State Zip Code
Greensburg PA 15601-9046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai02056

Amount of Each Receipt this Period
700.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. William Klug

Mailing Address N. 2426 Cherry Road

City State Zip Code
Rubicon WI 53078

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired 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
03 / 23 / 2009

Transaction ID: 2009M04L11ai02057

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Harold W. Knapheide, III

Mailing Address P.O. Box 7140

City State Zip Code
Quincy IL 62305-7140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Knapheide Manufacturing Company 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
03 / 02 / 2009

Transaction ID: 2009M04L11ai02058

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)

1900.00

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 693 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Jean D. Knapp

Mailing Address 3109 San Luis Drive

City State Zip Code
Colorad Springs CO 80909-1325

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02059

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Norman D. Knapp

Mailing Address 1431 County Road 1700 E

City State Zip Code
Roanoke IL 61561-7726

FEC ID number of contributing federal political committee. **C**

Name of Employer Caterpillar, Inc. Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02060

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Rita M. Kneeland

Mailing Address 521 Piermont Ave.

City State Zip Code
Rivervale NJ 07675-5707

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02061

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ► **605.00**

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 694 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George William Knight

Mailing Address 365 Breakwater Riege NE

City Atlanta State GA Zip Code 30328-1805

FEC ID number of contributing federal political committee. **C**

Name of Employer Gva Advantir Occupation Real Estate Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai02062

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Howell Knight

Mailing Address 8184 N. Yellow Pine Circle

City Glen Saint Mary State FL Zip Code 32040-3716

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 11 / 2009

Transaction ID: 2009M04L11ai02063

Amount of Each Receipt this Period 120.00

C. Full Name (Last, First, Middle Initial)
Mr. J. Knight

Mailing Address 999 Ponce De Leon Blvd. Suite 510

City Coral Gables State FL Zip Code 33134-3037

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai02064

Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 720.00

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 695 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William H. Knight

Mailing Address 214 Ridgeway Dr.

City Greensboro State NC Zip Code 27403-1527

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02065

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Carol Knisley

Mailing Address 5145 County Road 4200

City Cherryvale State KS Zip Code 67335-9706

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai02066

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Carol Knisley

Mailing Address 5145 County Road 4200

City Cherryvale State KS Zip Code 67335-9706

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02067

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 696 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. David M. Knize		Date of Receipt MM / DD / YYYY 03 / 24 / 2009		
	Mailing Address 112 Mayhurst Avenue		Transaction ID: 2009M04L11ai02068		
	City Colorado Springs	State CO	Zip Code 80906-3056	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Richard G. Knowland, Jr.		Date of Receipt MM / DD / YYYY 03 / 13 / 2009		
	Mailing Address 105 Kennedy Street		Transaction ID: 2009M04L11ai02069		
	City Fayetteville	State NY	Zip Code 13066-1320	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Dewey Knuth		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 72194 Road 437		Transaction ID: 2009M04L11ai02070		
	City Oxford	State NE	Zip Code 68967-6734	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation Self-Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1575.00			

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 697 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Butch Knutson
Mailing Address P.O. Box 2604
City State Zip Code
Gillette WY 82717-2604
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-Employed Self-Employed
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9
Transaction ID: 2009M04L11ai02071
Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mrs. Margaret W. Kobusch
Mailing Address 10015 Conway Rd.
City State Zip Code
Saint Louis MO 63124-1237
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Homemaker Homemaker
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 3 / 2 0 0 9
Transaction ID: 2009M04L11ai02072
Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Margaret W. Kobusch
Mailing Address 10015 Conway Rd.
City State Zip Code
Saint Louis MO 63124-1237
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Homemaker Homemaker
Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 3 0 / 2 0 0 9
Transaction ID: 2009M04L11ai02073
Amount of Each Receipt this Period
50.00

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 698 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Karen M A Koch
Mailing Address 10139 Burrock Drive
City Santee State CA Zip Code 92071-1130
FEC ID number of contributing federal political committee. **C**
Name of Employer Aloe Life International Inc Occupation Clinical Nutritionist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai02074
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Larry J. Kohmescher
Mailing Address 4908 Camberley Circle
City Williamsburg State VA Zip Code 23188-8801
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02075
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Thor Kollé
Mailing Address 135 E Main St
City Caledonia State MN Zip Code 55921
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation N/A
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai02076
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 699 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Lily C. Koo

Mailing Address 4409 Crown Knoll Circle

City	State	Zip Code
Flower Mound	TX	75028-8504

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai02077

Amount of Each Receipt this Period
60.00

B.

Full Name (Last, First, Middle Initial)
Ms. Lily C. Koo

Mailing Address 4409 Crown Knoll Circle

City	State	Zip Code
Flower Mound	TX	75028-8504

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai02078

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Ms. Betty J. Koppler

Mailing Address 3280 Sly Park Road

City	State	Zip Code
Pollock Pines	CA	95726-9591

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02079

Amount of Each Receipt this Period
25.00

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 700 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Harry Kord

Mailing Address 2918 Ferris Avenue

City State Zip Code
Royal Oak MI 48073-3523

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02080

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Mr. Albert Koster

Mailing Address 98 Franklin Street

City State Zip Code
Vineyard Hvn MA 02568-5203

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai02081

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Ms. Martha E. Kourbage

Mailing Address 400 Bayside

City State Zip Code
Breezy Point NY 11697-1009

FEC ID number of contributing federal political committee. **C**

Name of Employer Kingsway Exterminating Co-pany, Inc. Occupation Bookkeeper

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai02082

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1075.00**

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 701 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms Ada Kousoum
 Mailing Address 12010 Johns Place
 City State Zip Code
 Fairfax VA 22033-4646
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 20 / 2009
Transaction ID: 2009M04L11ai02083
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

B. Full Name (Last, First, Middle Initial)
Dr. Stephen M. Kovarik
 Mailing Address 13968 Neck Yoke Road
 City State Zip Code
 Rapid City SD 57702-7314
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2009
Transaction ID: 2009M04L11ai02084
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Self-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Ina A. Kozesky
 Mailing Address 1865 Chatuge Lane
 City State Zip Code
 Young Harris GA 30582-6915
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2009
Transaction ID: 2009M04L11ai02085
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 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 702 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Beverly Krabel	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 1373 S. 150 W.	Transaction ID: 2009M04L11ai02086
	City State Zip Code Greenfield IN 46140-8503	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Eli Lilly & Company	Occupation Chemist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

B.	Full Name (Last, First, Middle Initial) Mr. Peter R. Krallitsch	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 295 N. Rebecca Street	Transaction ID: 2009M04L11ai02087
	City State Zip Code Crystal Lake IL 60014-3632	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Self-Employed	Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. William A. Kramer	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 2626 Howell Street Floor 10	Transaction ID: 2009M04L11ai02088
	City State Zip Code Dallas TX 75204-4064	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Republic Title Of Texas	Occupation Title Company Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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 703 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Mark Krasinski

Mailing Address 127 Gilbert Road

City State Zip Code
New Hartford NY 13413-2505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bank Of N. Y. Banker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	9

Transaction ID: 2009M04L11ai02089

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Dorothy Kreder

Mailing Address 13799 Myers Lane S.

City State Zip Code
Jefferson OR 97352-9751

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	9

Transaction ID: 2009M04L11ai02090

Amount of Each Receipt this Period
220.00

C. Full Name (Last, First, Middle Initial)
Mr. William Kresge

Mailing Address 6818 Napier Lane

City State Zip Code
Houston TX 77069-1230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W.H. Kresgé Company President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	0	9

Transaction ID: 2009M04L11ai02091

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **420.00**

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 704 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William Kresge

Mailing Address 6818 Napier Lane

City State Zip Code
Houston TX 77069-1230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W.H. Kresge Company President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02092

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Louis Kriser

Mailing Address 46905 Grissom Street

City State Zip Code
Potomac Falls VA 20165-3577

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02093

Amount of Each Receipt this Period
130.00

C. Full Name (Last, First, Middle Initial)
Mr. Bill Krochalis

Mailing Address 226 Lindsey Place N. E.

City State Zip Code
Marietta GA 30067-4235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Zc Sterling Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02094

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **430.00**

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 705 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Robert Krone

Mailing Address 8100 Graves Rd

City State Zip Code
Cincinnati OH 45243-3631

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Greater Center Health Net- work Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai02095

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Ms. Marlene Krpata

Mailing Address 8853 Promenade North Place

City State Zip Code
San Diego CA 92123-6455

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Solar Turbines Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai02096

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
Mr. William T. Krug

Mailing Address 567 Longwood Drive S.E.

City State Zip Code
Grand Rapids MI 49301-7724

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai02097

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: PAGE 706 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Roger Kucway

Mailing Address 5954 Walnut Springs

City State Zip Code
Sylvania OH 43560-9460

FEC ID number of contributing federal political committee. **C**

Name of Employer Tro Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai02098

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. William Kugler

Mailing Address P. O. Box 40246

City State Zip Code
Denver CO 80204-0246

FEC ID number of contributing federal political committee. **C**

Name of Employer United Construction Products Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02099

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Peter Kuk

Mailing Address 10 Redfox Trail

City State Zip Code
Sicklerville NJ 08081-3708

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai02100

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **810.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 707 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Robert & Shirley L. Kula		Date of Receipt
	Mailing Address P.O. Box 668		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Fort Morgan	CO	80701-0668
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02101
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	75.00

B.	Full Name (Last, First, Middle Initial) Mr. David G. Kulik		Date of Receipt
	Mailing Address 713 Great Egret Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 12 / 2009
	City	State	Zip Code
	Ponte Vedra	FL	32082-7226
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02102
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	500.00

C.	Full Name (Last, First, Middle Initial) Ms. Betty R. Kulyk		Date of Receipt
	Mailing Address 11505 Route 6 North		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	Albion	PA	16401
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02103
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	160.00

SUBTOTAL of Receipts This Page (optional)	735.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 708 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Betty R. Kulyk

Mailing Address 11505 Route 6 North

City Albion State PA Zip Code 16401

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai02104
 Amount of Each Receipt this Period: 120.00

B. Full Name (Last, First, Middle Initial)
Ms. Lisa G. Kunkel

Mailing Address 14 Grady Hill Court

City Poughkeepsie State NY Zip Code 12603-1126

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: 2009M04L11ai02105
 Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Betty Kurtz

Mailing Address 1800 Atrium Parkway
Apartment 340

City Napa State CA Zip Code 94559-4807

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai02106
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 470.00

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 709 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. & Mrs. Randy A. Kyler
 Mailing Address 134 County Road 3996

City Pawhuska State OK Zip Code 74056-9760

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai02107
 Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
 Mr. & Mrs. Randy A. Kyler
 Mailing Address 134 County Road 3996

City Pawhuska State OK Zip Code 74056-9760

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai02108
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
 Adam Labrato
 Mailing Address 105 S Mobile St

City Fairhope State AL Zip Code 36532-3410

FEC ID number of contributing federal political committee. **C**

Name of Employer Alaska Tanker Co Occupation Merchant Marine

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: 2009M04L11ai02109
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **350.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 710 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Audrey K. Lafleur

Mailing Address 210 Clear Lake Lane

City State Zip Code
Weatherford TX 76087-9170

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02110

Amount of Each Receipt this Period
275.00

B. Full Name (Last, First, Middle Initial)
Mr. John Lafontaine

Mailing Address 41485 Adams Street
Unit C.

City State Zip Code
Bermuda Dunes CA 92203-1186

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02111

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles Derek Lagemann

Mailing Address 1 Dolphin Green

City State Zip Code
Port Washington NY 11050-3140

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2175.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02112

Amount of Each Receipt this Period
2175.00

SUBTOTAL of Receipts This Page (optional) ► 2700.00

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 711 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert & Alice Lahne

Mailing Address 1326 W. Stephenson Street

City State Zip Code
Freeport IL 61032-4776

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	9

Transaction ID: 2009M04L11ai02113

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. & Mrs. James M. Lally

Mailing Address 2496 Sierra Drive

City State Zip Code
Upland CA 91784-1182

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: 2009M04L11ai02114

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Ruth A. Lamonica

Mailing Address P.O. Box 1171

City State Zip Code
Minden NV 89423-1171

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	0	9

Transaction ID: 2009M04L11ai02115

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 712 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Terry F. Lamore

Mailing Address 545 Overhill Drive

City State Zip Code
Tryon NC 28782-7723

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai02116

Amount of Each Receipt this Period
305.00

B. Full Name (Last, First, Middle Initial)
Dr. Ray Landes

Mailing Address 28 Crescent Circle

City State Zip Code
Harleysville PA 19438-1070

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02117

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
Mr. James Landis

Mailing Address 254 Hungry Hollow Road

City State Zip Code
Oroville WA 98844-9690

FEC ID number of contributing federal political committee. **C**

Name of Employer Disabled Occupation Disabled

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai02118

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **515.00**

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 713 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
William C Lane

Mailing Address 40 Hidden Brook Lane

City State Zip Code
Signal Mountain TN 37377-2063

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lane Steel Fab., Inc. Corp Vp

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02119

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Charles Lang

Mailing Address 235 Galewood Drive

City State Zip Code
Edgewater MD 21037-3436

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A.T.&T. Operations Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai02120

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Stephens J. Lange

Mailing Address 3240 Lake Pointe Blvd.
Apartment 226

City State Zip Code
Sarasota FL 34231-6948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai02121

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 714 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stephens J. Lange

Mailing Address 3240 Lake Pointe Blvd.
Apartment 226

City Sarasota State FL Zip Code 34231-6948

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02122

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Atlas & Judy Langford

Mailing Address 1834 Madison Street
Apartment J-69

City Clarksville State TN Zip Code 37043-2947

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02123

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. David Langham

Mailing Address 2 St. Paul St. #407

City Brookline State MA Zip Code 02446-6599

FEC ID number of contributing federal political committee. **C**

Name of Employer Novartis Occupation Financial Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02124

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 715 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Willard Langhenry

Mailing Address 7323 Centenary

City State Zip Code
Dallas TX 75225-4625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Natioanl Realty Group Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02125

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph H Langhirt

Mailing Address 2013 West Rogers Avenue

City State Zip Code
Baltimore MD 21209-4550

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dla Piper Lip (Us) Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02126

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Chandos E. Langston, Jr.

Mailing Address 2102 W. Myrtle Drive

City State Zip Code
Chandler AZ 85248-4121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02127

Amount of Each Receipt this Period
100.00

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 716 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Chandos E. Langston, Jr.
Mailing Address 2102 W. Myrtle Drive

City State Zip Code
Chandler AZ 85248-4121

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02128

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Mr. Christopher J. Lank
Mailing Address 13669 Coastal Highway

City State Zip Code
Milton DE 19968-3725

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02129

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Else C. Lappoehn
Mailing Address 3210 S. Sandhill Road
Unit 238

City State Zip Code
Las Vegas NV 89121-5817

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02130

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **390.00**

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 717 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Jeanne A. Lasota

Mailing Address 11 Horseshoe Lane

City Paoli State PA Zip Code 19301-1935

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 16 / 2009

Transaction ID: 2009M04L11ai02131

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Elwood Lassiter

Mailing Address 700 Park Regency Place N.E.
Apartment 2303

City Atlanta State GA Zip Code 30326-1271

FEC ID number of contributing federal political committee. **C**

Name of Employer Rsvi Group, Inc. Occupation Insurance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai02132

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Evelyn Day Latimer

Mailing Address 3100 N. Leisure World Blvd.
#222

City Silver Spring State MD Zip Code 20906-8342

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 27 / 2009

Transaction ID: 2009M04L11ai02133

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 718 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Jeanne Laudick

Mailing Address 436 Heron Cove

City State Zip Code
Fort Collins CO 80524-8601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai02134

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Frank T. Lauinger

Mailing Address 5311 Stonegate Road

City State Zip Code
Dallas TX 75209-3517

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Penn Well Corporation Business Information Services

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai02135

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Judith L. Lavin

Mailing Address 10 Lake Drive

City State Zip Code
West Greenwich RI 02817-1561

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hi-Tech, Inc. Owner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai02136

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 719 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Gregory B. Lawless

Mailing Address 9681 Wawbeek Road

City State Zip Code
Century FL 32535-2290

FEC ID number of contributing federal political committee. **C**

Name of Employer Collins Mabry & Company, L.L.C. Occupation Attorney

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai02137

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Dan Lawrence

Mailing Address 286 Lincoln Drive

City State Zip Code
Streetman TX 75859-3295

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt: MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02138

Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mr. James R. Lawrence

Mailing Address 2540 Merri Oaks Court

City State Zip Code
Cocoa FL 32926-6315

FEC ID number of contributing federal political committee. **C**

Name of Employer Rockwellcollins Occupation Engineer

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00

Date of Receipt: MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai02139

Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► **725.00**

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 720 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James R. Lawrence

Mailing Address 2540 Merri Oaks Court

City State Zip Code
Cocoa FL 32926-6315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rockwellcollins Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02140

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. John Lawrence

Mailing Address 1800 S. 36Th Street

City State Zip Code
Galesburg MI 49053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02141

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth M. Lawrence

Mailing Address 214 E. Church Street
Apartment 2

City State Zip Code
Collinsville IL 62234-2842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unemployed Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02142

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 800.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 721 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Kenneth M. Lawrence

Mailing Address 214 E. Church Street
Apartment 2

City State Zip Code
Collinsville IL 62234-2842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unemployed Unemployed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai02143

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Connie Lawson

Mailing Address 3891 West County Road 100 S.

City State Zip Code
Danville IN 46122-8234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
State Of Indiana State Senator

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
355.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai02144

Amount of Each Receipt this Period
355.00

C.

Full Name (Last, First, Middle Initial)
Mr. William Lay

Mailing Address 1289 Hedge Lane

City State Zip Code
Paducah KY 42001-5251

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02145

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

855.00

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 722 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Gregory K. Laycock
 Mailing Address 1144 E. Forest Avenue
 City Ypsilanti State MI Zip Code 48198-3910
 Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02146
 Amount of Each Receipt this Period 300.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Washtenaw Community College Occupation Scheduling & Database Analyst
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard K. Layman
 Mailing Address 10 Windswept Drive
 City Malvern State PA Zip Code 19355-2321
 Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai02147
 Amount of Each Receipt this Period 750.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Legg Mason Real Estate Services Occupation Senior Managing Director
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date 750.00

C. Full Name (Last, First, Middle Initial)
Ms. Barbara Jean Layten
 Mailing Address 406 W. Main Street
 City Downs State IL Zip Code 61736-9490
 Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02148
 Amount of Each Receipt this Period 30.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date 235.00

SUBTOTAL of Receipts This Page (optional) ► 1080.00
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 723 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Nancy M. Lazzara

Mailing Address 2425 Hessing Street

City State Zip Code
River Grove IL 60171-1725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Amberdeen Wedding Flowers Floral Designer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	9

Transaction ID: 2009M04L11ai02149

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Ms. Nancy M. Lazzara

Mailing Address 2425 Hessing Street

City State Zip Code
River Grove IL 60171-1725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Amberdeen Wedding Flowers Floral Designer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	9

Transaction ID: 2009M04L11ai02150

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Tin Tri Le

Mailing Address 25011 Owens Lake Circle

City State Zip Code
Lake Forest CA 92630-2524

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai02151

Amount of Each Receipt this Period
20.00

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: PAGE 724 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Tin Tri Le		Date of Receipt MM / DD / YYYY 03 / 06 / 2009
Mailing Address 25011 Owens Lake Circle		Transaction ID: 2009M04L11ai02152
City Lake Forest	State CA	Zip Code 92630-2524
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Mr. Tin Tri Le		Date of Receipt MM / DD / YYYY 03 / 23 / 2009
Mailing Address 25011 Owens Lake Circle		Transaction ID: 2009M04L11ai02153
City Lake Forest	State CA	Zip Code 92630-2524
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Mr. Tin Tri Le		Date of Receipt MM / DD / YYYY 03 / 23 / 2009
Mailing Address 25011 Owens Lake Circle		Transaction ID: 2009M04L11ai02154
City Lake Forest	State CA	Zip Code 92630-2524
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	65.00
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 725 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Daniel C. Le Febvre, Sr.
Mailing Address P.O. Box 335

City State Zip Code
Pittsburg NH 03592-0335

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai02155

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Daniel C. Le Febvre, Sr.
Mailing Address P.O. Box 335

City State Zip Code
Pittsburg NH 03592-0335

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02156

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Burton A. Le Vine
Mailing Address 3390 Don Diablo Drive

City State Zip Code
Carlsbad CA 92010-3914

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02157

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 726 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John S. Leake, Us Army

Mailing Address 16017 Kings Mountain Road

City State Zip Code
Woodbridge VA 22191-4531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. Army Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02158

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
Orest Lechnowsky

Mailing Address 4721 E La Mirada Way

City State Zip Code
Phoenix AZ 85044-7527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Jpmorgan Chase Bank, N.A. Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02159

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mrs. Ingeborg R. Ledergerber

Mailing Address 14248 S.W. 47Th Street

City State Zip Code
Miami FL 33175-4320

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02160

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 160.00

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 727 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
John Ledoux

Mailing Address 1701 Broadway
Unit D

City Vancouver State WA Zip Code 98663-3436

FEC ID number of contributing federal political committee. **C**

Name of Employer Plexsys Interface Products, Inc. Occupation Ceo

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai02161
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Clifton S. Lee

Mailing Address 2910 Churchill Drive

City Hillsborough State CA Zip Code 94010-6211

FEC ID number of contributing federal political committee. **C**

Name of Employer Neumart Company, L.L.C. Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02162
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Edward Gaylord Lee

Mailing Address 15581 Shell Point Blvd.

City Fort Myers State FL Zip Code 33908-1656

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai02163
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 728 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Karl O. Lee

Mailing Address 1919 12Th Avenue SE

City Aberdeen State SD Zip Code 57401-7320

FEC ID number of contributing federal political committee. **C**

Name of Employer Karl O. Lee Company Occupation Vice President & Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 16 / 2009

Transaction ID: 2009M04L11ai02164

Amount of Each Receipt this Period 250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Karl O. Lee

Mailing Address 1919 12Th Avenue SE

City Aberdeen State SD Zip Code 57401-7320

FEC ID number of contributing federal political committee. **C**

Name of Employer Karl O. Lee Company Occupation Vice President & Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai02165

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert E. Lee

Mailing Address P.O. Box 40035

City Tucson State AZ Zip Code 85717-0035

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai02166

Amount of Each Receipt this Period 450.00

SUBTOTAL of Receipts This Page (optional) ▶ 950.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 729 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Tai Young Lee		Date of Receipt MM / DD / YYYY 03 / 04 / 2009		
	Mailing Address 1430 Joh Ave Ste M.		Transaction ID: 2009M04L11ai02167		
	City Baltimore	State MD	Zip Code 21227-1037	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer P.T.C. Int'd	Occupation Economist & Business Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. William Lee		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 2 Murfield Drive		Transaction ID: 2009M04L11ai02168		
	City Lincroft	State NJ	Zip Code 07738-1216	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Mr. William Lee		Date of Receipt MM / DD / YYYY 03 / 19 / 2009		
	Mailing Address 2 Murfield Drive		Transaction ID: 2009M04L11ai02169		
	City Lincroft	State NJ	Zip Code 07738-1216	Amount of Each Receipt this Period 50.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

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 730 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Greg Leffler

Mailing Address 104 Buckingham Circle

City State Zip Code
 Charlottesville VA 22903-2908

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 09 / 2009

Transaction ID: 2009M04L11ai02170

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Greg Leffler

Mailing Address 104 Buckingham Circle

City State Zip Code
 Charlottesville VA 22903-2908

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 20 / 2009

Transaction ID: 2009M04L11ai02171

Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Glenn P. Lefkovitz

Mailing Address 112 Glenwood Ave

City State Zip Code
 Winnetka IL 60093-1509

FEC ID number of contributing federal political committee. **C**

Name of Employer Glenn Mgt Occupation Mgt Co

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 06 / 2009

Transaction ID: 2009M04L11ai02172

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional) ► **250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 731 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Lamar S. Lehman

Mailing Address 2461 Pikeside Drive

City State Zip Code
Greencastle PA 17225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai02173

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Ernest Lehmann

Mailing Address 798 26Th Avenue

City State Zip Code
San Mateo CA 94403-2635

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: 2009M04L11ai02174

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ernest Lehmann

Mailing Address 798 26Th Avenue

City State Zip Code
San Mateo CA 94403-2635

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 201.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: 2009M04L11ai02175

Amount of Each Receipt this Period
101.00

SUBTOTAL of Receipts This Page (optional)

451.00

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 732 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Howard F. Lehnert, Jr.

Mailing Address 145 Masons Crossing Court

City State Zip Code
Severna Park MD 21146-1752

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

Transaction ID: 2009M04L11ai02176

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Howard F. Lehnert, Jr.

Mailing Address 145 Masons Crossing Court

City State Zip Code
Severna Park MD 21146-1752

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	0	9

Transaction ID: 2009M04L11ai02177

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Anthony J. Leitner

Mailing Address 36 Ridgewood Terrace

City State Zip Code
Maplewood NJ 07040-2133

FEC ID number of contributing federal political committee. **C**

Name of Employer A J Leitner and Associates Llc Occupation Consultant

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

Transaction ID: 2009M04L11ai02178

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

450.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 733 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. James Leker

Mailing Address 976 Gondolier Boulevard

City State Zip Code
Gulf Breeze FL 32563-3018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Apollomd Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

Transaction ID: 2009M04L11ai02179

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Max R. Lemke

Mailing Address 5614 South Jamaica Way

City State Zip Code
Englewood CO 80111-3937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	9

Transaction ID: 2009M04L11ai02180

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. John R. Lemmons

Mailing Address 1973 Rose Valley Road

City State Zip Code
Kelso WA 98626-9672

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pacific Fibre Products, Inc Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	9

Transaction ID: 2009M04L11ai02181

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1600.00

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 734 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Laura Jane Lencioni

Mailing Address 11 Gary Way

City Alamo State CA Zip Code 94507-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai02182
 Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Patrick Lencioni

Mailing Address 11 Gary Way

City Alamo State CA Zip Code 94507-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer The Table Group Occupation Consultant/Author

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai02183
 Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Patrick Lencioni

Mailing Address 11 Gary Way

City Alamo State CA Zip Code 94507-2429

FEC ID number of contributing federal political committee. **C**

Name of Employer The Table Group Occupation Consultant/Author

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai02184
 Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 735 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Patricia Perkins Leone

Mailing Address 90 Queens Court

City State Zip Code
Atherton CA 94027-5409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai02185

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Timothy W. Lepczyk

Mailing Address 22 Highview Road

City State Zip Code
Madison CT 06443-2554

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Lic Management Consultant

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02186

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Paul Lesutis

Mailing Address 7 Chaville Way

City State Zip Code
Wilmington DE 19807-1422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Brandywine Global Investm-ent Mgmt. Investment Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai02187

Amount of Each Receipt this Period
330.00

SUBTOTAL of Receipts This Page (optional)

5430.00

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 736 / 1945

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Jane Lethco

Mailing Address 323 Mount Drive

City State Zip Code
Sevierville TN 37876-1625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
I. R. S. Federal Employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	9

Transaction ID: 2009M04L11ai02188

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Jane Lethco

Mailing Address 323 Mount Drive

City State Zip Code
Sevierville TN 37876-1625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
I. R. S. Federal Employee

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	9

Transaction ID: 2009M04L11ai02189

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Ms Marie Lett

Mailing Address 3940 Lett Lane

City State Zip Code
Burleson TX 76028-1742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	9

Transaction ID: 2009M04L11ai02190

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional) ▶

550.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 737 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Alex S. Levay

Mailing Address 366 High Plain Road

City State Zip Code
Andover MA 01810-3295

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02191

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Bernard F Lewis

Mailing Address 1401 Park Avenue

City State Zip Code
Bay City MI 48708-5530

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02192

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Blane Benjamin Lewis

Mailing Address 13217 Amblewood Drive

City State Zip Code
Manassas VA 20112-7817

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. Government Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02193

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: PAGE 738 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles H. Lewis, III

Mailing Address P.O. Box 70

City State Zip Code
Gloster MS 39638-0070

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02194

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald S. Lewis, Jr.

Mailing Address 708 Cavalier Drive

City State Zip Code
Virginia Beach VA 23451-3838

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02195

Amount of Each Receipt this Period
85.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald S. Lewis, Jr.

Mailing Address 708 Cavalier Drive

City State Zip Code
Virginia Beach VA 23451-3838

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02196

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **635.00**

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 739 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Elsie Y. Lewis

Mailing Address 607 Poia Road

City State Zip Code
Sewickley PA 15143-1046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02197

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Eugene B. Lewis

Mailing Address 4428 W. Laurie Lane

City State Zip Code
Glendale AZ 85302-6623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai02198

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Fred Lewis

Mailing Address 13700 Lynhurst Drive

City State Zip Code
Woodbridge VA 22193-4333

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Vienna Virginia Police Department Police Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02199

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 740 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Fred Lewis

Mailing Address 13700 Lynhurst Drive

City State Zip Code
Woodbridge VA 22193-4333

FEC ID number of contributing federal political committee. **C**

Name of Employer: Vienna Virginia Police Department
Occupation: Police Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai02200
Amount of Each Receipt this Period: 125.00

B. Full Name (Last, First, Middle Initial)
Mrs. Margery C. Lewis

Mailing Address 2464 Bayshore Drive

City State Zip Code
Newport Beach CA 92663-5605

FEC ID number of contributing federal political committee. **C**

Name of Employer: Homemaker
Occupation: Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai02201
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul Jay Lewis

Mailing Address 309 West 43Rd Street Suite 105

City State Zip Code
Sioux Falls SD 57105-6805

FEC ID number of contributing federal political committee. **C**

Name of Employer: PAL Inc
Occupation: Real Estate Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai02202
Amount of Each Receipt this Period: 500.00

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 741 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert L. Lewis

Mailing Address 4312 S. 31St Street
Apartment 105

City State Zip Code
Temple TX 76502-3360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
201.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai02203

Amount of Each Receipt this Period
201.00

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas D. Lewis

Mailing Address 33 San Ysidro Court

City State Zip Code
Danville CA 94526-1545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N. T. L. General Contractor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02204

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. H. William Lichtenberger

Mailing Address 508 N.W. Winters Creek Road

City State Zip Code
Palm City FL 34990-3831

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02205

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)

3201.00

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 742 / 1945
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Jim Liebe
 Mailing Address 582 Goddard Ave
 City State Zip Code
 Chesterfield MO 63005-1109
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2009
Transaction ID: 2009M04L11ai02206
 Amount of Each Receipt this Period
 100.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 R. J. Liebe Athletic Lettering Executive
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

B. Full Name (Last, First, Middle Initial)
 Mr. A. C. Lilly
 Mailing Address 9641 Waterfowl Flyway
 City State Zip Code
 Chesterfield VA 23838-8905
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 03 / 2009
Transaction ID: 2009M04L11ai02207
 Amount of Each Receipt this Period
 2500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Retired
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2500.00

C. Full Name (Last, First, Middle Initial)
 Mr. Phillip Lindau
 Mailing Address 12720 31st Avenue N.
 City State Zip Code
 Plymouth MN 55441-2868
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2009
Transaction ID: 2009M04L11ai02208
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Commodity Specialists Company Owner/Executive
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) ► 3600.00
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 743 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Louis B. Lindsey		Date of Receipt MM / DD / YYYY 03 / 30 / 2009		
	Mailing Address 3825 324Th Avenue S.E.		Transaction ID: 2009M04L11ai02209		
	City	State	Zip Code	Amount of Each Receipt this Period	
	Fall City	WA	98024-7713	200.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer Retired		Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Mrs. Roberta Jean Linn		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address Pop Box 945		Transaction ID: 2009M04L11ai02210		
	City	State	Zip Code	Amount of Each Receipt this Period	
	Fort Sumner	NM	88119	500.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer Linn Farms		Occupation Farmer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) Mr. Corey Linquist		Date of Receipt MM / DD / YYYY 03 / 31 / 2009		
	Mailing Address 2521 Clarksville Road		Transaction ID: 2009M04L11ai02211		
	City	State	Zip Code	Amount of Each Receipt this Period	
	Rescue	CA	95672-9606	250.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer Metropcs		Occupation Management			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	950.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 744 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Clare Macaulay Lintereur
Mailing Address 25512 Magnolia Ln.
City Stevenson Ranch State CA Zip Code 91381-1843
FEC ID number of contributing federal political committee. **C**
Name of Employer Clare Macaulay D.D.S. Occupation Dentist
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02212
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Samuel L. Lionberger, Jr.
Mailing Address 55 Harbour View Circle
City Penhook State VA Zip Code 24137-5091
FEC ID number of contributing federal political committee. **C**
Name of Employer Lionberger Construction Co. Occupation General Contractor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai02213
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Walter C. Lips
Mailing Address 6540 White Rock Road
City Clifton State VA Zip Code 20124-1410
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. Department Of Energy Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai02214
Amount of Each Receipt this Period 75.00

SUBTOTAL of Receipts This Page (optional) ▶ 575.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 745 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Harvey I. Lipschultz		Date of Receipt
	Mailing Address 2339 Jupiter Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	Los Angeles	CA	90046-2025
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02215
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 280.00

B.	Full Name (Last, First, Middle Initial) Mr. Mark A. List		Date of Receipt
	Mailing Address 61148 Prescott Trail		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	Joshua Tree	CA	92252-2714
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02216
Name of Employer United States Marine Corps		Occupation U.S. Marine	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00

C.	Full Name (Last, First, Middle Initial) Mr. Dennis R. Little		Date of Receipt
	Mailing Address 11410 Longwater Chase Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	Fort Myers	FL	33908-4924
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02217
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 180.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 660.00
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 746 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Tracy Little

Mailing Address 300 W. 1st Street

City State Zip Code
Alice TX 78332

FEC ID number of contributing federal political committee. **C**

Name of Employer Energy Dynamics Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02218

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Leonard Litwin

Mailing Address 18 Broadlawn Avenue

City State Zip Code
Great Neck NY 11024-1537

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02219

Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
Don Lloyd

Mailing Address 127 Bobcat Trail

City State Zip Code
Eatonton GA 31024-7505

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02220

Amount of Each Receipt this Period: 2000.00

SUBTOTAL of Receipts This Page (optional) ► **4500.00**

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 747 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Jim F. Lloyd		Date of Receipt
	Mailing Address 2308 Matador Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 13 / 2009
	City	State	Zip Code
	Austin	TX	78746-2321
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02221
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 400.00
		<input type="text"/> 400.00	

B.	Full Name (Last, First, Middle Initial) Mr. Mario G Loaiza		Date of Receipt
	Mailing Address 6331 Sedgewyck Circle West		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Davie	FL	33331-3457
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02222
Name of Employer Self		Occupation Security Consultant -Veteran	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) Dr. Michael R. Lobis		Date of Receipt
	Mailing Address 989 Baneswood Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Kennett Square	PA	19348-2551
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02223
Name of Employer Brandywine Urology Consultants		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1900.00
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 748 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. George A. Lock

Mailing Address 211 Diamond Springs

City State Zip Code
Houston TX 77077

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Exxon Mobil Research Vice President Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02224

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Betty W. Locke

Mailing Address P.O. Box 1012

City State Zip Code
Fallbrook CA 92088-1012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Whole Sale Business Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02225

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Richard & Sandra Loeding

Mailing Address 1217 Peninsula Drive

City State Zip Code
Traverse City MI 49686-2856

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02226

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ► **460.00**

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 749 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Anne Jordan Logan

Mailing Address 3814 Potomac Avenue

City State Zip Code
Dallas TX 75205-2115

FEC ID number of contributing federal political committee. **C**

Name of Employer Intercity Investments Occupation Real Estate Develop.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02227
Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Mrs. Linda A. Lonano

Mailing Address 8472 159Th Court N.

City State Zip Code
Palm Beach Gardens FL 33418-1879

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 03 / 03 / 2009
Transaction ID: 2009M04L11ai02228
Amount of Each Receipt this Period: 210.00

C. Full Name (Last, First, Middle Initial)
Mrs. Linda A. Lonano

Mailing Address 8472 159Th Court N.

City State Zip Code
Palm Beach Gardens FL 33418-1879

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02229
Amount of Each Receipt this Period: 105.00

SUBTOTAL of Receipts This Page (optional) ► 5315.00

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 750 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Leroy E. Long

Mailing Address 528 Tower Road

City State Zip Code
Sellersville PA 18960-3130

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02230

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Dr. Mark Loos

Mailing Address 361 Saint Andrews Lane

City State Zip Code
Half Moon Bay CA 94019-2226

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
C.U.S.D. Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02231

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Barry L. Loose

Mailing Address 375 Lake St

City State Zip Code
Ephrata PA 17522-2456

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
QBC Warehouse Worker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02232

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 1600.00

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 751 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Alice W. Lorillard
Mailing Address P. O. Box 219
City State Zip Code
Far Hills NJ 07931-0219
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai02233
Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
Mrs. Alice W. Lorillard
Mailing Address P. O. Box 219
City State Zip Code
Far Hills NJ 07931-0219
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02234
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Ms. Coral S. Losh
Mailing Address 181 Huntington Parkway
City State Zip Code
Aberdeen OH 45101-9719
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 05 / 2009
Transaction ID: 2009M04L11ai02235
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 752 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stephen H. Louden

Mailing Address 285 Indian Creek Loop

City State Zip Code
Kerrville TX 78028-1758

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02236

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Edward Alexander Louis

Mailing Address 645 N. Wren Avenue

City State Zip Code
Palatine IL 60067-3544

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02237

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Gilbert Louzoun

Mailing Address 35 Greenleaf Hill

City State Zip Code
Great Neck NY 11023-1809

FEC ID number of contributing federal political committee. **C**

Name of Employer Queensboro Toyota Occupation Auto Dealer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02238

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 753 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert Love

Mailing Address 14115 Saint Marys Lane

City State Zip Code
Houston TX 77079-3212

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02239

Amount of Each Receipt this Period 200.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert Love

Mailing Address 14115 Saint Marys Lane

City State Zip Code
Houston TX 77079-3212

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02240

Amount of Each Receipt this Period 200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Steven C. Love

Mailing Address P.O. Box 260

City State Zip Code
Healy AK 99743-0260

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai02241

Amount of Each Receipt this Period 50.00

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 754 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Steven C. Love

Mailing Address P.O. Box 260

City Healy State AK Zip Code 99743-0260

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai02242

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Steven C. Love

Mailing Address P.O. Box 260

City Healy State AK Zip Code 99743-0260

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai02243

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Jesse W. Lovelace

Mailing Address 569 Lexington Circle

City Memphis State TN Zip Code 38120-2727

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai02244

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 350.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 755 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert D. Lowe

Mailing Address 1313 W. St. Amry Blvd.

City State Zip Code
Lafayette LA 70506-3604

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai02245

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert D. Lowe

Mailing Address 1313 W. St. Amry Blvd.

City State Zip Code
Lafayette LA 70506-3604

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai02246

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Mort Lowenthal

Mailing Address 72 Windward Lane

City State Zip Code
Stamford CT 06903-3710

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02247

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00

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 756 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Jim Lowrey

Mailing Address 5518 Sauve Lane

City State Zip Code
Houston TX 77056-1214

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02248

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Ms. Gladys A. Lowrie

Mailing Address 17 N.E. 68Th Avenue

City State Zip Code
Portland OR 97213-5601

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02249

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Ms. Gladys A. Lowrie

Mailing Address 17 N.E. 68Th Avenue

City State Zip Code
Portland OR 97213-5601

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02250

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ► 465.00

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 757 / 1945

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Gladys A. Lowrie

Mailing Address 17 N.E. 68Th Avenue

City State Zip Code
Portland OR 97213-5601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai02251

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Mr. Buzz Loyd

Mailing Address 493 Windwood On Skye

City State Zip Code
Fayetteville NC 28303-4776

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai02252

Amount of Each Receipt this Period
330.00

C.

Full Name (Last, First, Middle Initial)
Mr. James Lucas

Mailing Address 8 Olive Circle

City State Zip Code
Clinton IL 61727-2439

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Exelon Senior Reactor Operator

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai02253

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

620.00

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 758 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
John Lucas, Sr.
Mailing Address 5453 Woodford Drive

City State Zip Code
Birmingham AL 35242

FEC ID number of contributing federal political committee. **C**

Name of Employer Lucas Llc Occupation Small Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai02254
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Ms. Patricia P. Lufkin
Mailing Address P.O. Box 1470

City State Zip Code
Saratoga WY 82331-1470

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: 2009M04L11ai02255
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Allan W. Lund
Mailing Address 15025 W. Beckwith Road

City State Zip Code
Hayward WI 54843-2004

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai02256
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 759 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02257

Amount of Each Receipt this Period
10.00

B.

Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02258

Amount of Each Receipt this Period
10.00

C.

Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02259

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **35.00**

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 760 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin
 Mailing Address 1121 S. 221St West Avenue
 City Sand Springs State OK Zip Code 74063-8149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Warehouse Market Occupation Carry Out
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00
 Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02260
 Amount of Each Receipt this Period 10.00

B. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin
 Mailing Address 1121 S. 221St West Avenue
 City Sand Springs State OK Zip Code 74063-8149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Warehouse Market Occupation Carry Out
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00
 Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02261
 Amount of Each Receipt this Period 10.00

C. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin
 Mailing Address 1121 S. 221St West Avenue
 City Sand Springs State OK Zip Code 74063-8149
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Warehouse Market Occupation Carry Out
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00
 Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02262
 Amount of Each Receipt this Period 15.00

SUBTOTAL of Receipts This Page (optional) ► 35.00
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 761 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02263

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02264

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02265

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional) ► **35.00**

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 762 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin
Mailing Address 1121 S. 221St West Avenue
City Sand Springs State OK Zip Code 74063-8149
FEC ID number of contributing federal political committee. **C**
Name of Employer Warehouse Market Occupation Carry Out
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 730.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai02266
Amount of Each Receipt this Period 35.00

B. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin
Mailing Address 1121 S. 221St West Avenue
City Sand Springs State OK Zip Code 74063-8149
FEC ID number of contributing federal political committee. **C**
Name of Employer Warehouse Market Occupation Carry Out
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 730.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02267
Amount of Each Receipt this Period 15.00

C. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin
Mailing Address 1121 S. 221St West Avenue
City Sand Springs State OK Zip Code 74063-8149
FEC ID number of contributing federal political committee. **C**
Name of Employer Warehouse Market Occupation Carry Out
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 730.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02268
Amount of Each Receipt this Period 10.00

SUBTOTAL of Receipts This Page (optional) ▶ 60.00
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 763 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02269

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02270

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02271

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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 764 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02272

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02273

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02274

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional) ► **30.00**

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 765 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai02275

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
Ms. Michelle Erin Lundin

Mailing Address 1121 S. 221St West Avenue

City Sand Springs State OK Zip Code 74063-8149

FEC ID number of contributing federal political committee. **C**

Name of Employer Warehouse Market Occupation Carry Out

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 730.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai02276

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. David S. Lusby

Mailing Address 1937 S. Abrego Drive

City Green Valley State AZ Zip Code 85614-1403

FEC ID number of contributing federal political committee. **C**

Name of Employer Newell Recycling, L.L.C. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: 2009M04L11ai02277

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **270.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 766 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms Sue L. Luster		Date of Receipt
	Mailing Address 3238 History Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Oakton	VA	22124-2209
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02278
Name of Employer Home Health Options Group		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) Ms Sue L. Luster		Date of Receipt
	Mailing Address 3238 History Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Oakton	VA	22124-2209
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02279
Name of Employer Home Health Options Group		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 250.00	

C.	Full Name (Last, First, Middle Initial) Ms Sue L. Luster		Date of Receipt
	Mailing Address 3238 History Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Oakton	VA	22124-2209
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02280
Name of Employer Home Health Options Group		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
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 767 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Walter C Luther, Jr.
Mailing Address 4488 Jessup Rd.
City Cincinnati State OH Zip Code 45247-6048
FEC ID number of contributing federal political committee. **C**
Name of Employer Jacobs Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai02281
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Daniel R. Lyle
Mailing Address 7341 Almaden Lane
City Carlsbad State CA Zip Code 92009-6902
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai02282
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Lanny G. Lyle
Mailing Address 14770 Eagle Ridge Drive
City Forest Ranch State CA Zip Code 95942-9701
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai02283
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00
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 768 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert W. Lyle

Mailing Address 156 Valhalla Road

City State Zip Code
Cordele GA 31015-9364

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Conart, Inc. C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02284

Amount of Each Receipt this Period
110.00

B. Full Name (Last, First, Middle Initial)
Ms. Florence Lyman

Mailing Address 300 Remington Street
Apartment 316

City State Zip Code
Fort Collins CO 80524-2840

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02285

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. James Lynch

Mailing Address 1 Signal Ridge Way

City State Zip Code
East Greenwich RI 02818-1649

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dans Management Company President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai02286

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 660.00

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 769 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Larry Lynch

Mailing Address 1150 Kentucky Greens Way

City State Zip Code
Newcastle CA 95658-9798

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 03 / 27 / 2009

Transaction ID: 2009M04L11ai02287

Amount of Each Receipt this Period 110.00

B. Full Name (Last, First, Middle Initial)
Ms. Nancy E. Lyons

Mailing Address 580 Piedmont Street

City State Zip Code
Wilmington OH 45177-2521

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 03 / 2009

Transaction ID: 2009M04L11ai02288

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Nancy E. Lyons

Mailing Address 580 Piedmont Street

City State Zip Code
Wilmington OH 45177-2521

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 03 / 2009

Transaction ID: 2009M04L11ai02289

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 310.00

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 770 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James M. Lysaght

Mailing Address P.O. Box 1697

City State Zip Code
Mineola NY 11501-0904

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation
Program Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02290

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Sonja J. Maas

Mailing Address N28 W22312 Foxwood Lane

City State Zip Code
Waukesha WI 53186-8858

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02291

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Ron C Mabee

Mailing Address P.O. Box 40370

City State Zip Code
Houston TX 77240-0370

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation
Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02292

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 771 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. William Mac Kinnon

Mailing Address 5460 28 Mile Road

City Washington State MI Zip Code 48094-1200

FEC ID number of contributing federal political committee. **C**

Name of Employer U.L.C. Occupation Engineering Technician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02293
Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Ms. Sarah-Jane Jane Macauley

Mailing Address 307 Walnut Street

City Jackson State CA Zip Code 95642-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02294
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Sarah-Jane Jane Macauley

Mailing Address 307 Walnut Street

City Jackson State CA Zip Code 95642-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai02295
Amount of Each Receipt this Period 25.00

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: (check only one)	PAGE 772 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Colonel Michael Machac, Jr.	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 718 Habegger Avenue	Transaction ID: 2009M04L11ai02296
	City State Zip Code Sparta WI 54656-1318	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) David Mack	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 30661 Sweetridge Cir	Transaction ID: 2009M04L11ai02297
	City State Zip Code Boerne TX 78015-4212	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Mpc Contracting	Occupation Building Contractor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert B. Mack	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 25 Mosswood Road	Transaction ID: 2009M04L11ai02298
	City State Zip Code Hillsborough CA 94010-6717	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Unemployed	Occupation Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	710.00
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 773 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert B. Mack	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 25 Mosswood Road	Transaction ID: 2009M04L11ai02299
	City Hillsborough State CA Zip Code 94010-6717	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Unemployed Occupation Unemployed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. William H. Mackey	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 9865 Sago Point Drive	Transaction ID: 2009M04L11ai02300
	City Largo State FL Zip Code 33777-4905	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert Macoy, Jr.	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 9027 Stonecrest Way	Transaction ID: 2009M04L11ai02301
	City Littleton State CO Zip Code 80129-1516	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 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 774 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Jay M. Madara

Mailing Address 135 Patriots Ridge Drive

City State Zip Code
Woodbury NJ 08096

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Comcast Corporation C.P.A.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai02302

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Jason Madden

Mailing Address 144 Granbury Lane

City State Zip Code
Columbia SC 29229-7556

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Target Corporation District Team Leader

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02303

Amount of Each Receipt this Period 110.00

C. Full Name (Last, First, Middle Initial)
Mr. Crawford Madeira, Jr.

Mailing Address 414 Old Lancaster Road
Apartment 403

City State Zip Code
Haverford PA 19041-1573

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02304

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) 460.00

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 775 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Abraham S. Maeck

Mailing Address 5644 Westheimer Rd. #300

City State Zip Code
Houston TX 77056

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	8		2	0	0	9

Transaction ID: 2009M04L11ai02305

Amount of Each Receipt this Period
325.00

B.

Full Name (Last, First, Middle Initial)
Mr. George A. Magan

Mailing Address 45 Stephen Street

City State Zip Code
New Bedford MA 02740-1223

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	9

Transaction ID: 2009M04L11ai02306

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Mr. George A. Magan

Mailing Address 45 Stephen Street

City State Zip Code
New Bedford MA 02740-1223

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	0	9

Transaction ID: 2009M04L11ai02307

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ▶

625.00

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 776 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Joseph Charles Maggioro

Mailing Address 2225 Meadow Ridge Lane

City State Zip Code
Virginia Beach VA 23456-1398

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 0 9

Transaction ID: 2009M04L11ai02308

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert Magliacano

Mailing Address 206 Poinier Street

City State Zip Code
Newark NJ 07114-2407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C&J Towing Service Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 0 9

Transaction ID: 2009M04L11ai02309

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Dr. Matthew J. Magnino

Mailing Address 26721 Elkhorn Oaks Circle

City State Zip Code
Arlington NE 68002-3091

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai02310

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ►

750.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 777 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Frederic & Laura Maguire

Mailing Address 1055 Denton Hollow Road

City State Zip Code
West Chester PA 19382-7026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Maguire Products Plant Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai02311

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Billy C. Maher

Mailing Address 3899 Green Valley Road

City State Zip Code
Fairfield CA 94534-1471

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02312

Amount of Each Receipt this Period
270.00

C. Full Name (Last, First, Middle Initial)
Ms. Heidi Mahmood

Mailing Address 4515 Roxbury Road

City State Zip Code
Corona Del Mar CA 92625-3126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02313

Amount of Each Receipt this Period
310.00

SUBTOTAL of Receipts This Page (optional) ► **830.00**

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 778 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John Mahn

Mailing Address P.O. Box 150

City Aurora State IN Zip Code 47001-0150

FEC ID number of contributing federal political committee. **C**

Name of Employer Ceo Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai02314

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. R. A. Mahony

Mailing Address 670 Lake Drive

City Vero Beach State FL Zip Code 32963-2165

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai02315

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Jack L. Mahurin

Mailing Address 433 Ward Parkway
Apartment 5E

City Kansas City State MO Zip Code 64112-2128

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2009

Transaction ID: 2009M04L11ai02316

Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ► **725.00**

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 779 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Ken Maily

Mailing Address 68 Seneca Trl

City State Zip Code
Wayne NJ 07470-4427

FEC ID number of contributing federal political committee. **C**

Name of Employer: Maily & Inglett Consulting, L
Occupation: Physical Therapist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai02317
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Gregory M. Majewski

Mailing Address 4274 Oak Knoll Lane

City State Zip Code
Hoffman Estates IL 60192-5607

FEC ID number of contributing federal political committee. **C**

Name of Employer: Wildcat
Occupation: Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai02318
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. William Davis Majure

Mailing Address 121 Booth Circle

City State Zip Code
Ocean Springs MS 39564-8505

FEC ID number of contributing federal political committee. **C**

Name of Employer: Retired
Occupation: Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai02319
 Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 780 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Philip E. Malberg

Mailing Address 512 Cherry Gulch Road

City Durango State CO Zip Code 81301-6470

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai02320

Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Philip E. Malberg

Mailing Address 512 Cherry Gulch Road

City Durango State CO Zip Code 81301-6470

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai02321

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary J. Malevich

Mailing Address 9812 Cupola Lane

City Eden Prairie State MN Zip Code 55347-3623

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1855.00

Date of Receipt 03 / 13 / 2009

Transaction ID: 2009M04L11ai02322

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 325.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 781 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Mary J. Malevich

Mailing Address 9812 Cupola Lane

City State Zip Code
Eden Prairie MN 55347-3623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1855.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai02323

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Harold E. Malion, Jr.

Mailing Address P.O. Box 218

City State Zip Code
Fairmont NC 28340-0218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai02324

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Eugene E. Mallette

Mailing Address 8401 Hialeah Way

City State Zip Code
Fair Oaks CA 95628-2608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02325

Amount of Each Receipt this Period
200.00

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 782 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. Dudley D. Malone

Mailing Address 2417 Wulfert Road

City State Zip Code
 Sanibel FL 33957-2201

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 02 / 2009

Transaction ID: 2009M04L11ai02326

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
 Mr. Robert E. Malone

Mailing Address 18721 E. Buckskin Drive

City State Zip Code
 Rio Verde AZ 85263-7164

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 02 / 2009

Transaction ID: 2009M04L11ai02327

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
 Mr. & Mrs. David C. Malpass

Mailing Address 21330 N. Coburg Road

City State Zip Code
 Harrisburg OR 97446-9747

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2009

Transaction ID: 2009M04L11ai02328

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 783 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Laureano E. Manalo, II

Mailing Address 1743 Scarlett Drive

City State Zip Code
Pittsburgh PA 15241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Larry E. Manalos Dds Dentist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02329

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Charles G. Mander

Mailing Address 24 Wilcox Place

City State Zip Code
Fair Lawn NJ 07410-5516

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N.Y. City Transit Authority Civil Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 310.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai02330

Amount of Each Receipt this Period
110.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard T. Mandeville

Mailing Address 500 Linda Vista Avenue

City State Zip Code
Pasadena CA 91105-1121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai02331

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

610.00

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 784 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard Manley

Mailing Address 3201 Crenshaw St.

City State Zip Code
Longview TX 75605-2520

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02332

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Jay Mann

Mailing Address 14201 Grand Street

City State Zip Code
Wichita KS 67230-9742

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
Wichita Child Guidance Center Psychologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02333

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Dwight Mansfield

Mailing Address 17 Plaza Baja Del Sol

City State Zip Code
San Juan Capistran CA 92675-1705

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02334

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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 785 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Carol Manubay

Mailing Address 85 Caravel Drive

City State Zip Code
Bear DE 19701-1651

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Caravel Academy Finance Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02335

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Jacqueline R. Manzi

Mailing Address 104 Pineburr Road

City State Zip Code
Greensboro NC 27455-1723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02336

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Ms. Jacqueline R. Manzi

Mailing Address 104 Pineburr Road

City State Zip Code
Greensboro NC 27455-1723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02337

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **270.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 786 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. James E. Marchessault	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 3218 Butternut Circle N.W.	Transaction ID: 2009M04L11ai02338
	City State Zip Code Prior Lake MN 55372-2304	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer B.C.S.I. Occupation C.E.O. Printer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. Joseph F. Marcogliese	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 241 Kitchawan Road	Transaction ID: 2009M04L11ai02339
	City State Zip Code South Salem NY 10590-2017	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00	

C.	Full Name (Last, First, Middle Initial) Ms. Ann H. Marcus	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 117 N. Monarch Street #1	Transaction ID: 2009M04L11ai02340
	City State Zip Code Aspen CO 81611-1448	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

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 787 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David H. Mardigian

Mailing Address 35980 Woodward Avenue
Suite 110

City State Zip Code
Bloomfield Hills MI 48304-0933

FEC ID number of contributing federal political committee. **C**

Name of Employer Mcm Management Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	0	9

Transaction ID: 2009M04L11ai02341

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Dr. Robert Maresh

Mailing Address 264 Hollywood Boulevard

City State Zip Code
Metairie LA 70005-3920

FEC ID number of contributing federal political committee. **C**

Name of Employer Tulane University Medical Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	0	9

Transaction ID: 2009M04L11ai02342

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Greg P. Margolis

Mailing Address 17819 Davenport Rd
Suite 210

City State Zip Code
Dallas TX 75252-5894

FEC ID number of contributing federal political committee. **C**

Name of Employer Hometronics Occupation Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai02343

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

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 788 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Richard P. Marinelli

Mailing Address 1266 Knollwood Drive

City State Zip Code
West Chester PA 19380-3946

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02344

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Dr. & Mrs. Dennis N. Marks

Mailing Address 1800 Jeffrey Lane

City State Zip Code
Carmichael CA 95608-5761

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai02345

Amount of Each Receipt this Period
550.00

C.

Full Name (Last, First, Middle Initial)
Mr. Terry Maroney

Mailing Address 10 Town & Country Drive

City State Zip Code
Danville CA 94526-3722

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai02346

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

1350.00

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 789 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Wayne R. Marpe

Mailing Address 2420 W. Rainwater Court

City State Zip Code
Meridian ID 83646-1289

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02347

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mr. John A. Marrella

Mailing Address P.O. Box 827

City State Zip Code
New Haven CT 06504-0827

FEC ID number of contributing federal political committee. **C**

Name of Employer Town of Woodbridge, CT. Occupation Elected Official

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai02348

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Chuck Marsden

Mailing Address 6261 Hill Avenue

City State Zip Code
Whittier CA 90601-3829

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02349

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 790 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms Donna Marsh		Date of Receipt MM / DD / YYYY 03 / 04 / 2009		
	Mailing Address 2018 E. Deerwood Drive		Transaction ID: 2009M04L11ai02350		
	City Richmond	State TX	Zip Code 77406-9655	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Vinson & Elkins	Occupation Paralegal			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

B.	Full Name (Last, First, Middle Initial) Ms. Julie Marsland		Date of Receipt MM / DD / YYYY 03 / 30 / 2009		
	Mailing Address 3240 Falling Leaf Road		Transaction ID: 2009M04L11ai02351		
	City Show Low	State AZ	Zip Code 85901-2886	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation Self-Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

C.	Full Name (Last, First, Middle Initial) Mr. Christopher Martin		Date of Receipt MM / DD / YYYY 03 / 25 / 2009		
	Mailing Address 1578 Horseshoe Drive		Transaction ID: 2009M04L11ai02352		
	City Manasquan	State NJ	Zip Code 08736-2704	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer The Provident Bank	Occupation Bank President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
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 791 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frank E Martin

Mailing Address 3030 S. Highland

City Las Vegas State NV Zip Code 89109-1047

FEC ID number of contributing federal political committee. **C**

Name of Employer Martin Harris Construction Occupation President/Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai02353
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. James E. Martin

Mailing Address 4343 Lebanon Pike
Apartment T1518

City Hermitage State TN Zip Code 37076-1441

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai02354
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. John M. Martin

Mailing Address P.O. Box 565066

City Dallas State TX Zip Code 75356-5066

FEC ID number of contributing federal political committee. **C**

Name of Employer Art Dallas Incorporated Occupation C.E.O./ V.P. Operations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai02355
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00

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 792 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Nancy Martin

Mailing Address 2306 Twin Lakes Circle
Dr. Bobby Graham Jr.

City Jackson State MS Zip Code 39211-6757

FEC ID number of contributing federal political committee. **C**

Name of Employer Mississippi State Hospital Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02356
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul R. Martin

Mailing Address 11734 2nd Avenue NW

City Seattle State WA Zip Code 98177-4506

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai02357
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. William F. Martin

Mailing Address 835 Tropical Circle

City Sarasota State FL Zip Code 34242-1440

FEC ID number of contributing federal political committee. **C**

Name of Employer Chateau Products, Inc. Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 25 / 2009
Transaction ID: 2009M04L11ai02358
Amount of Each Receipt this Period 500.00

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 793 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Sergio O. Martinez

Mailing Address 27 Cortez Avenue

City Rancho Viejo State TX Zip Code 78575-9629

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai02359
Amount of Each Receipt this Period 225.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard Marx

Mailing Address 59 Damonte Ranch Parkway #B250

City Reno State NV Zip Code 89521-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai02360
Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph Masessa

Mailing Address 22 Bentley Drive

City Franklin Lakes State NJ Zip Code 07417-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai02361
Amount of Each Receipt this Period 50.00

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 794 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Joseph Masessa

Mailing Address 22 Bentley Drive

City State Zip Code
Franklin Lakes NJ 07417-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	9

Transaction ID: 2009M04L11ai02362

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Alberta Mason

Mailing Address 3352 Ocean Drive

City State Zip Code
Corpus Christi TX 78411-1457

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	0	9

Transaction ID: 2009M04L11ai02363

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Ms. Frances H. Mason

Mailing Address 2609 Honolulu Avenue
Suite 100

City State Zip Code
Montrose CA 91020-1734

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	9

Transaction ID: 2009M04L11ai02364

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶

950.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 795 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lowell B. Mason, Jr.
Mailing Address 4141 Lake Terrace Drive
City Kalamazoo State MI Zip Code 49008-2511
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai02365
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Mr. William S. Mason
Mailing Address P.O. Box 1609
City Ozona State TX Zip Code 76943
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai02366
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Patrick O Mathes
Mailing Address 120 Sprin Dale Dr.
City Terry State MS Zip Code 39170-7107
FEC ID number of contributing federal political committee. **C**
Name of Employer Ryan Energy Occupation Directional Driller
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 19 / 2009
Transaction ID: 2009M04L11ai02367
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 850.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 796 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Errol J. Mathieu

Mailing Address 241 N. Goldenspur Way

City State Zip Code
Orange CA 92869-4429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2009

Transaction ID: 2009M04L11ai02368

Amount of Each Receipt this Period
205.00

B.

Full Name (Last, First, Middle Initial)
Mr. Harry Mattei

Mailing Address 3804 Warren Court

City State Zip Code
Mobile AL 36608-1820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Thames And Batre Insurance Broker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai02369

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. S K Matter Jr

Mailing Address 271 Torpoint Gate Rd

City State Zip Code
Longwood FL 32779

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
At&T Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02370

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

705.00

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 797 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Raymond D. Mattheis

Mailing Address 170 55Th Avenue N.W.

City Hazen State ND Zip Code 58545-9400

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 17 / 2009
Transaction ID: 2009M04L11ai02371
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert W. Matthews

Mailing Address 3647 Arcadian Drive

City Castro Valley State CA Zip Code 94546-1113

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt: 03 / 04 / 2009
Transaction ID: 2009M04L11ai02372
Amount of Each Receipt this Period: 202.00

C. Full Name (Last, First, Middle Initial)
Mrs. Verna D. Mattox

Mailing Address 200 Paris Lane
Apartment 218

City Newport Beach State CA Zip Code 92663-1602

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai02373
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 552.00

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 798 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joel L. Mattsson

Mailing Address 14155 Pepin Place

City State Zip Code
Carmel IN 46032-9251

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2009

Transaction ID: 2009M04L11ai02374

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. M. Raymond Matuza

Mailing Address 181 Inlet Drive

City State Zip Code
Saint Augustine FL 32080-5836

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai02375

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
Dr. & Mrs. Robert Maurer

Mailing Address 13664 Treasure Trail Drive

City State Zip Code
San Antonio TX 78232-3500

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02376

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 1850.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 799 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joseph Charles May

Mailing Address 1561 Briardale Drive

City Lucas State TX Zip Code 75002-7690

FEC ID number of contributing federal political committee. **C**

Name of Employer Boeing Occupation Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai02377
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Leon May

Mailing Address 230 Ensworth Place

City Nashville State TN Zip Code 37205-1922

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai02378
 Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael B. May

Mailing Address 3304 Rhodes Avenue
Apartment 128

City New Boston State OH Zip Code 45662-4914

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai02379
 Amount of Each Receipt this Period: 300.00

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 800 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Michael B. May		Date of Receipt MM / DD / YYYY 03 / 02 / 2009
Mailing Address 3304 Rhodes Avenue Apartment 128		Transaction ID: 2009M04L11ai02380
City New Boston	State OH	Zip Code 45662-4914
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.

Full Name (Last, First, Middle Initial) Mr. Michael B. May		Date of Receipt MM / DD / YYYY 03 / 09 / 2009
Mailing Address 3304 Rhodes Avenue Apartment 128		Transaction ID: 2009M04L11ai02381
City New Boston	State OH	Zip Code 45662-4914
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.

Full Name (Last, First, Middle Initial) Mr. Michael B. May		Date of Receipt MM / DD / YYYY 03 / 16 / 2009
Mailing Address 3304 Rhodes Avenue Apartment 128		Transaction ID: 2009M04L11ai02382
City New Boston	State OH	Zip Code 45662-4914
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

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 801 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George L. Mayer

Mailing Address 2 Andrews Road

City State Zip Code
Essex CT 06426-1311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Manhattan Realty Group Real Estate Investment

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02383

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Gerald J. Mayer

Mailing Address P.O. Box 9412

City State Zip Code
Toledo OH 43697-9412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02384

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles Mazander

Mailing Address P.O. Box 945

City State Zip Code
Benton AR 72018-0945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02385

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 802 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James A. Mazzei

Mailing Address 5421 Oak Forest Lane

City State Zip Code
Tulsa OK 74131-3462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Aerospace Corporation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02386

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. James A. Mazzei

Mailing Address 5421 Oak Forest Lane

City State Zip Code
Tulsa OK 74131-3462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Aerospace Corporation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02387

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Eric Mc Afee

Mailing Address 10600 N De Anza Blvd

City State Zip Code
Cupertino CA 95014-2000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mc Afee Capital, LLC Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02388

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: PAGE 803 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Patrick J. Mc Aleese

Mailing Address 3276 Bellavista Lane

City State Zip Code
Las Vegas NV 89122-3316

FEC ID number of contributing federal political committee. **C**

Name of Employer Culver City Composite Occupation Accounting

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02389

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. David S. Mc Burnett

Mailing Address 401 Isom Road Suite 100

City State Zip Code
San Antonio TX 78216-5151

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai02390

Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Patricia Mc Call

Mailing Address 2310B Nantucket Drive

City State Zip Code
Houston TX 77057-2957

FEC ID number of contributing federal political committee. **C**

Name of Employer P.M.C.C. & H. Ltd. Occupation Jolamteer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02391

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00

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 804 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Kathleen Mc Caslin

Mailing Address 541 E. Erie Street
Unit 201

City State Zip Code
Milwaukee WI 53202-6235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02392

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Sam W. Mc Cleskey

Mailing Address 265 Lakeview Beach Drive

City State Zip Code
Miramar Beach FL 32550-4192

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02393

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. John Luke Mc Conn

Mailing Address 301 Sage

City State Zip Code
Houston TX 77056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sage Refined Products Oil Broker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02394

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1450.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 805 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Penny J. Mc Connell		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address 1442 5Th Avenue		Transaction ID: 2009M04L11ai02395		
	City Redlands	State CA	Zip Code 92374-5443	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 250.00		
Name of Employer Redlands Unified School District		Occupation Account Clerk			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Howard R. Mc Cord		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 203 Sea Oats Drive Apartment H.		Transaction ID: 2009M04L11ai02396		
	City Juno Beach	State FL	Zip Code 33408-1453	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 400.00		
Name of Employer Retired		Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

C.	Full Name (Last, First, Middle Initial) Mr. Neil G. Mc Cormick		Date of Receipt MM / DD / YYYY 03 / 05 / 2009		
	Mailing Address 18580 Rivercliff Drive		Transaction ID: 2009M04L11ai02397		
	City Cleveland	State OH	Zip Code 44126-1740	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 220.00		
Name of Employer Self-Employed		Occupation Self-Employed			
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) ▶

550.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 806 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Miss Richerlee Beth Mc Cormick

Mailing Address 1819 N.E. Hancock Street

City Portland State OR Zip Code 97212-4541

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02398
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Dr. Karl Mc Cowen

Mailing Address 7702 Goodman Drive N.W.

City Gig Harbor State WA Zip Code 98332-9557

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai02399
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Ms. Sheila J. Mc Coy

Mailing Address P.O. Box 1675

City Lexington State KY Zip Code 40588-1675

FEC ID number of contributing federal political committee. **C**

Name of Employer Sheila A. Johnson, Inc. Occupation Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai02400
Amount of Each Receipt this Period: 100.00

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 807 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. & Mrs. Dino E.P. Mc Curdy

Mailing Address 801 Yale Avenue
The Strath Haven #802

City Swarthmore State PA Zip Code 19081-1816

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02401

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Dr. & Mrs. Dino E.P. Mc Curdy

Mailing Address 801 Yale Avenue
The Strath Haven #802

City Swarthmore State PA Zip Code 19081-1816

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai02402

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Dr. & Mrs. Dino E.P. Mc Curdy

Mailing Address 801 Yale Avenue
The Strath Haven #802

City Swarthmore State PA Zip Code 19081-1816

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 975.00

Date of Receipt MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02403

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 808 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Larry W. Mc Curdy

Mailing Address 116 Randi Drive

City State Zip Code
Madison CT 06443-2462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02404

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)

Mr. Lonnie Mc Curry

Mailing Address 721 S. Ammerman Avenue

City State Zip Code
Eastland TX 76448-3201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai02405

Amount of Each Receipt this Period
130.00

C.

Full Name (Last, First, Middle Initial)

Mr. Lowell Mc Cuskey

Mailing Address P.O. Box 800

City State Zip Code
Linn MO 65051-0800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai02406

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

730.00

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 809 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles W. Mc Daniel

Mailing Address 101 Caroline Street

City State Zip Code
Fredericksbrg VA 22401-6103

FEC ID number of contributing federal political committee. **C**

Name of Employer Hilldrvp Companiel Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02407

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Cyrus Mc Daniel

Mailing Address 3615 North Countryview Road

City State Zip Code
Urbana IL 61802-5742

FEC ID number of contributing federal political committee. **C**

Name of Employer Cross Construction, Inc. Occupation C. F. O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02408

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Dr. John E. Mc Donald

Mailing Address 2500 Canyon Ridge Court

City State Zip Code
Arlington TX 76006-4039

FEC ID number of contributing federal political committee. **C**

Name of Employer Ameripath Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02409

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 810 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John P. Mc Donnell

Mailing Address 23600 Edgeview Court

City State Zip Code
Deer Park IL 60010-3638

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02410

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard H. Mc Donnell

Mailing Address 70 Sanders Ranch Road

City State Zip Code
Moraga CA 94556-2806

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02411

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Rori Mc Dougal

Mailing Address 103 Concord Court

City State Zip Code
Swedesboro NJ 08085-3003

FEC ID number of contributing federal political committee. **C**

Name of Employer Peoplecore, Inc. Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02412

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 811 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Darcy Mc Dougall

Mailing Address 414 Creekside Lane

City Sandpoint State ID Zip Code 83864-2301

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai02413
Amount of Each Receipt this Period: 750.00

B. Full Name (Last, First, Middle Initial)
Mr. W. Wallace Mc Dowell, Jr.

Mailing Address 426 Lake Avenue

City Greenwich State CT Zip Code 06830-3851

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 03 / 2009
Transaction ID: 2009M04L11ai02414
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Ms. Mary G. Mc Eachern

Mailing Address 3600 El Centro Street

City Saint Petersburg B State FL Zip Code 33706-3908

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: 2009M04L11ai02415
Amount of Each Receipt this Period: 1500.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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 812 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert Mc Eldowney, Jr.

Mailing Address 111 Moorings Park Drive
Apartment 117

City Naples State FL Zip Code 34105-2199

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai02416
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. John Mc Elmoyl

Mailing Address 321 5th St

City Greenfield State CA Zip Code 93927-5107

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai02417
Amount of Each Receipt this Period 220.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael T. Mc Enany

Mailing Address 86 Martinique Avenue

City Tampa State FL Zip Code 33606-4053

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai02418
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1220.00

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 813 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Cecelia Mc Entee

Mailing Address 10347 Trellis Crossing Lane

City Richmond State VA Zip Code 23238-4443

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai02419
Amount of Each Receipt this Period 110.00

B. Full Name (Last, First, Middle Initial)
Mrs. Lyn Mc Fadden

Mailing Address 7505 Royal Oak Drive

City Mc Lean State VA Zip Code 22102-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer Coldwell Banker Occupation Realtor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai02420
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Ms. Olivia S. Mc Fadden

Mailing Address 11011 N. Zephyr Drive #111

City Fountain Hls State AZ Zip Code 85268-5505

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai02421
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ▶ 460.00

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 814 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
M. G. Richmond Mc Farland, Jr.
Mailing Address 118 Hillside Road

City State Zip Code
Wayne PA 19087-2634

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02422

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Dr. Keith A. Mc Farland
Mailing Address 13023 Blue Canyon Circle

City State Zip Code
Oklahoma City OK 73142-6207

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02423

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Nelson B. Mc Gee
Mailing Address 810 E. Riverside Avenue

City State Zip Code
San Angelo TX 76905-7840

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02424

Amount of Each Receipt this Period: 140.00

SUBTOTAL of Receipts This Page (optional) ▶ **640.00**

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 815 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Leland C. Mc Gill

Mailing Address 4245 E. 6Th Avenue

City State Zip Code
Denver CO 80220-4908

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	9	

Transaction ID: 2009M04L11ai02425

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Edith Mc Grath-Walsh

Mailing Address 906 Santa Hidalgo

City State Zip Code
Solana Beach CA 92075-1557

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	9	

Transaction ID: 2009M04L11ai02426

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Mrs. Edith Mc Grath-Walsh

Mailing Address 906 Santa Hidalgo

City State Zip Code
Solana Beach CA 92075-1557

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	9	

Transaction ID: 2009M04L11ai02427

Amount of Each Receipt this Period
75.00

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 816 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Harold W. Mc Graw, Jr.

Mailing Address 10 Watch Tower Road

City Darien State CT Zip Code 06820-2928

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai02428
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Mrs. Martha H. Mc Graw

Mailing Address 4 Noel Lane

City Cincinnati State OH Zip Code 45243-3722

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai02429
Amount of Each Receipt this Period 360.00

C. Full Name (Last, First, Middle Initial)
Mr. Tim W Mc Graw

Mailing Address 1417 Lanham

City Midland State TX Zip Code 79701-3922

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai02430
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1660.00

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 817 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Charles W. Mc Guire

Mailing Address 501 S. 16Th Street

City State Zip Code
Richmond IN 47374-6434

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai02431

Amount of Each Receipt this Period
220.00

B.

Full Name (Last, First, Middle Initial)
Mr. Leonard Mc Guire

Mailing Address P.O. Box 767

City State Zip Code
Manomet MA 02345-0767

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai02432

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Leonard Mc Guire

Mailing Address P.O. Box 767

City State Zip Code
Manomet MA 02345-0767

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai02433

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ▶

305.00

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 818 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. John H. Mc Henry	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 13373 N. Plaza Del Rio Blvd.	Transaction ID: 2009M04L11ai02434
	City Peoria State AZ Zip Code 85381-4873	Amount of Each Receipt this Period 1200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00	

B.	Full Name (Last, First, Middle Initial) Mr. John H. Mc Henry	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 13373 N. Plaza Del Rio Blvd.	Transaction ID: 2009M04L11ai02435
	City Peoria State AZ Zip Code 85381-4873	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1800.00	

C.	Full Name (Last, First, Middle Initial) Mr. S. A. Mc Innis	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address P.O. Box 8682	Transaction ID: 2009M04L11ai02436
	City Moss Point State MS Zip Code 39562-0011	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 819 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. J. Paul Mc Intosh

Mailing Address P.O. Box 1366

City State Zip Code
Norfolk NE 68702-1366

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02437

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Margaret Mc Iver

Mailing Address 5400 Covenant Lane

City State Zip Code
Winston Salem NC 27106-6459

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02438

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Marcia Mc Kenna

Mailing Address 1013 Kings Road

City State Zip Code
Conway SC 29526-9406

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02439

Amount of Each Receipt this Period
200.00

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 820 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Michael J. Mc Keon

Mailing Address 7824 W. Boulevard Drive

City State Zip Code
Alexandria VA 22308-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fish O. Richardson, P.C. Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	9

Transaction ID: 2009M04L11ai02440

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr. Paul D. Mc Kernan

Mailing Address 1526 W. Caribbean Lane

City State Zip Code
Phoenix AZ 85023-6791

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Arrowhead Ob/Gyn, Ltd Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: 2009M04L11ai02441

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard Mc Kinless

Mailing Address 5034 36Th Street

City State Zip Code
Arlington VA 22207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	0	9

Transaction ID: 2009M04L11ai02442

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 821 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Marvin Mc Kinney

Mailing Address 628 W. Surf Spray Lane

City State Zip Code
Ponte Vedra Beach FL 32082-3637

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02443

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Bob Mc Kown

Mailing Address 30 Cutting Cross Way

City State Zip Code
Wayland MA 01778-3844

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai02444

Amount of Each Receipt this Period
205.00

C. Full Name (Last, First, Middle Initial)
Mr. John F. Mc Laughlin, Jr.

Mailing Address 12137 St. Clement Street

City State Zip Code
Des Peres MO 63131-4020

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai02445

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ► **725.00**

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 822 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Matthew S. Mc Laughlin

Mailing Address 16916 Hierba Drive
Apartment 260

City San Diego State CA Zip Code 92128-2691

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02446

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Col. Billy A. Mc Leod

Mailing Address 7452 Spring Village Drive
Apartment 225

City Springfield State VA Zip Code 22150-4949

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02447

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Col. Billy A. Mc Leod

Mailing Address 7452 Spring Village Drive
Apartment 225

City Springfield State VA Zip Code 22150-4949

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02448

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 823 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. James H. Mc Manus

Mailing Address 88 Chestnut Street

City State Zip Code
Weston MA 02493-1533

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Fox & Hounds Properties Commercial Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai02449

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Col. Druery C. Mc Millan, U.S.A. (Re

Mailing Address 4080 Crest Road

City State Zip Code
Pebble Beach CA 93953-3007

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai02450

Amount of Each Receipt this Period 200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Edward N. Mc Millan

Mailing Address 29 Cherry Hills Farm

City State Zip Code
Englewood CO 80113-7113

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02451

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) 950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 824 / 1945
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Miss Janice R. Mc Morrow

Mailing Address 15109 Alexis Drive

City Tampa State FL Zip Code 33624-2344

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai02452
 Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Carolyn H Mc Murray

Mailing Address 111 Chunks Brook Rd

City Arlington State VT Zip Code 05250-8948

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02453
 Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Gerald J. Mc Nabb

Mailing Address 1369 Idaho Avenue W.

City Saint Paul State MN Zip Code 55108-2113

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai02454
 Amount of Each Receipt this Period 105.00

SUBTOTAL of Receipts This Page (optional) ► 855.00

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 825 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Alan Lock Mc Natt, Sr.

Mailing Address 4401 N. I-35
Mc Natt Properties, L.C.

City State Zip Code
Denton TX 76207-3432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mc Natt Properties, L.C. Real Estate

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai02455

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Denman K. Mc Near

Mailing Address 10 Turnagain Road

City State Zip Code
Kentfield CA 94904-2717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai02456

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. James E. Mc Nulty

Mailing Address 9463 Little Mountain Road

City State Zip Code
Kirtland Hills OH 44060-9405

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02457

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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 826 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Jordine Mc Nutt

Mailing Address 1705 W. Cedar Street

City State Zip Code
El Dorado AR 71730-5309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai02458

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Rick Mc Queary

Mailing Address 490 S. Oaks Drive

City State Zip Code
Springfield MO 65809-1101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mc Queary Brothers Drug Company Chairman

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02459

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Gerry Mc Reynolds

Mailing Address 12930 Sw Pacific Highway
P.O. Box 23877

City State Zip Code
Tigard OR 97223-5088

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pacific Tax Service Accountant/Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 18 / 2009

Transaction ID: 2009M04L11ai02460

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

1050.00

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 827 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Larry J. Mc Vay		Date of Receipt MM / DD / YYYY 03 / 04 / 2009		
	Mailing Address 9302 W. Pocket Hollow Road		Transaction ID: 2009M04L11ai02461		
	City Gosport	State IN	Zip Code 47433-8901	Amount of Each Receipt this Period 255.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed Occupation Self-Employed		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B.	Full Name (Last, First, Middle Initial) Mr. L. D. McClatchey		Date of Receipt MM / DD / YYYY 03 / 16 / 2009		
	Mailing Address 1212 N. Plaza Drive		Transaction ID: 2009M04L11ai02462		
	City Visalia	State CA	Zip Code 93291-8827	Amount of Each Receipt this Period 230.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed Occupation Self-Employed		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C.	Full Name (Last, First, Middle Initial) Mrs. Vilma McComsey		Date of Receipt MM / DD / YYYY 03 / 20 / 2009		
	Mailing Address 3414 Hunts Point Road		Transaction ID: 2009M04L11ai02463		
	City Hunts Point	State WA	Zip Code 98004-1116	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Homemaker Occupation Homemaker		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	▶	985.00
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 828 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Col. Joubert S. McCrea

Mailing Address 4800 Fillmore Avenue
Apartment 159

City State Zip Code
Alexandria VA 22311-5051

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	9

Transaction ID: 2009M04L11ai02464

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Doug McCreight

Mailing Address 7706 Royal Azalea Court

City State Zip Code
Springfield VA 22153-2157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	9

Transaction ID: 2009M04L11ai02465

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Doug McCreight

Mailing Address 7706 Royal Azalea Court

City State Zip Code
Springfield VA 22153-2157

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	0	9

Transaction ID: 2009M04L11ai02466

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

250.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 829 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Vincent J. McCue

Mailing Address P.O. Box 22
464 Sycamore Avenue

City Shrewsbury State NJ Zip Code 07702-0022

FEC ID number of contributing federal political committee. **C**

Name of Employer R&R Marketing Occupation Wholesale Liquor Distributor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai02467

Amount of Each Receipt this Period
135.00

B. Full Name (Last, First, Middle Initial)
Mr. James T. McCulley

Mailing Address 4308 Cloverdale Est.

City Northport State AL Zip Code 35473-1848

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02468

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael McNally

Mailing Address 9 Jane Lacey Dr.
Apartment B.

City Endicott State NY Zip Code 13760-3717

FEC ID number of contributing federal political committee. **C**

Name of Employer Hr Occupation United Health Service Vp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai02469

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **635.00**

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 830 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Rev. Thomas Mccabe

Mailing Address 9533 N. Shore Trl. N.

City State Zip Code
Forest Lake MN 55025-9185

FEC ID number of contributing federal political committee. **C**

Name of Employer Archdiocese Of St. Paul Occupation Catholic Clergy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02470

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Rev. Thomas Mccabe

Mailing Address 9533 N. Shore Trl. N.

City State Zip Code
Forest Lake MN 55025-9185

FEC ID number of contributing federal political committee. **C**

Name of Employer Archdiocese Of St. Paul Occupation Catholic Clergy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02471

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Denise Mccorkhill

Mailing Address 125 Palmetto Drive

City State Zip Code
Rincon GA 31326-5112

FEC ID number of contributing federal political committee. **C**

Name of Employer Verisign Occupation Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02472

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 831 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Dennis Mcdermott

Mailing Address 3880 Downing Lane NE

City Atlanta State GA Zip Code 30319-1669

FEC ID number of contributing federal political committee. **C**

Name of Employer Suntrust Occupation Banking

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai02473
Amount of Each Receipt this Period 5000.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas P. Mcdonagh, Jr.

Mailing Address 4951 Gulf Shore Blvd. N.
Apt.. 1702

City Naples State FL Zip Code 34103-2271

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai02474
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Dan Mckillop

Mailing Address 8120 Pheasant Dr.

City Gillette State WY Zip Code 82718-7243

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai02475
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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 832 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lon A Mcwrightman

Mailing Address 9145 SE Orient Drive

City Boring State OR Zip Code 97009-9423

FEC ID number of contributing federal political committee. **C**

Name of Employer Oregon and Health Science Univ Occupation Systems Software Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai02476

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Gary L. Meade

Mailing Address 103 Regent Court

City East Peoria State IL Zip Code 61611-1581

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai02477

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. August Meadows

Mailing Address 4300 Hampton Hall Court

City Belcamp State MD Zip Code 21017-1337

FEC ID number of contributing federal political committee. **C**

Name of Employer United States Army Occupation United States Army

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 19 / 2009

Transaction ID: 2009M04L11ai02478

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► **700.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 833 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Frances J. Meadows

Mailing Address 9801 W. Fm 4

City Godley State TX Zip Code 76044-3909

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai02479

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Alexandria Z. Meccia

Mailing Address 7520 Ridgewood Lane

City Burr Ridge State IL Zip Code 60527-5159

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai02480

Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Sandra Medchill

Mailing Address 1571 Fairway Circle

City Geneva State IL Zip Code 60134-3182

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai02481

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 834 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. & Mrs. Francisco S. Medina

Mailing Address 1337 Green Hills Court

City State Zip Code
Duncanville TX 75137-2841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai02482

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Regina A. Melbourne

Mailing Address 316 S Grant St

City State Zip Code
Hinsdale IL 60521-4053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker/Spouse

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai02483

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mr. James A Mell

Mailing Address 8355 NW 110st

City State Zip Code
Reddick FL 32686-4553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Management Alternatives, Ltd Vice President Operations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02484

Amount of Each Receipt this Period

100.00

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 835 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. James G. Mellin

Mailing Address 15 Wood Road

City Middletown State RI Zip Code 02842-6220

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	9

Transaction ID: 2009M04L11ai02485

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Mr. James G. Mellin

Mailing Address 15 Wood Road

City Middletown State RI Zip Code 02842-6220

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	9

Transaction ID: 2009M04L11ai02486

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Mr. Anthony L. Mellos

Mailing Address 16668 Cumbre Verde Court

City Pacific Palisades State CA Zip Code 90272-1914

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	7		2	0	0	9

Transaction ID: 2009M04L11ai02487

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 836 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Bohdan & Dolores Melnyk	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 26727 Newport Avenue	Transaction ID: 2009M04L11ai02488
	City Warren State MI Zip Code 48089-4557	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Mary Melvin	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address P.O. Box 3222	Transaction ID: 2009M04L11ai02489
	City Cary State NC Zip Code 27519-3222	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested Occupation Administrative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Mary Melvin	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address P.O. Box 3222	Transaction ID: 2009M04L11ai02490
	City Cary State NC Zip Code 27519-3222	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested Occupation Administrative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	170.00
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 837 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Mary Melvin

Mailing Address P.O. Box 3222

City State Zip Code
Cary NC 27519-3222

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation
Administrative

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02491

Amount of Each Receipt this Period
70.00

B.

Full Name (Last, First, Middle Initial)

Mr. Mark Mendenhall

Mailing Address 407 W. Cowan Dr.

City State Zip Code
Houston TX 77007-5034

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation
Food Distributor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai02492

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Colleen Merendino

Mailing Address 101999 Suey Creek Road

City State Zip Code
Santa Maria CA 93454

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation
Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai02493

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶

770.00

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 838 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Stephen Merrick		Date of Receipt	
	Mailing Address 422 W. Rosiland Dr.		M M / D D / Y Y Y Y 03 / 27 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai02494
	Palatine	IL	60074	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Citi Industries Corporation		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		500.00		

B.	Full Name (Last, First, Middle Initial) Mr. Thomas P. Merrick		Date of Receipt	
	Mailing Address 80 Harbor Ridge Drive		M M / D D / Y Y Y Y 03 / 31 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai02495
	Newport Beach	CA	92660-6814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

C.	Full Name (Last, First, Middle Initial) Dr. Robert Merrill		Date of Receipt	
	Mailing Address 1026 N. Fairview Place		M M / D D / Y Y Y Y 03 / 24 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai02496
	East Wenatchee	WA	98802-4494	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer Self		Occupation Dentist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
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 839 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. John Merritt

Mailing Address 10735 Cory Lake Drive

City Tampa State FL Zip Code 33647-2725

FEC ID number of contributing federal political committee. C

Name of Employer Veterans Hospital Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02497

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald T. Metcalfe

Mailing Address 106 Private Road 4261

City Clifton State TX Zip Code 76634-3653

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02498

Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Mr. Harry A. Metz, Jr.

Mailing Address 205 Fiddlers Point Drive

City Saint Augustine State FL Zip Code 32080-6134

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02499

Amount of Each Receipt this Period 100.00

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 840 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Janis Meyer

Mailing Address 4807 Buckskin Pass

City State Zip Code
Austin TX 78745-2837

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation
Section Administrator

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai02500

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Jimmy C. Meyer

Mailing Address 8103 Rolling Knoll Court

City State Zip Code
Springfield VA 22153-2530

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation
Senior Systems Analyst

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai02501

Amount of Each Receipt this Period
365.00

C.

Full Name (Last, First, Middle Initial)
Ms. Susanna S. Meyer

Mailing Address 8 Deer Haven Drive

City State Zip Code
Sheridan WY 82801-9052

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation
Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai02502

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

865.00

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 841 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Ernest S. Micek

Mailing Address 6940 E. Rock Ledge Place

City State Zip Code
Tucson AZ 85750-0982

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02503

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Mary E. Michael

Mailing Address P.O. Box 75

City State Zip Code
Saint Michaels MD 21663-0075

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02504

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael J. Migliore, Jr.

Mailing Address 7901 Locke Road

City State Zip Code
Vacaville CA 95688-9615

FEC ID number of contributing federal political committee. **C**

Name of Employer City Of Berkeley Occupation Firefighter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02505

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► 900.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 842 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Carolyn P. Mijares		Date of Receipt
	Mailing Address P.O. Box 456		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2009
	City	State	Zip Code
	Sunset Beach	CA	90742-0456
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02506
		Amount of Each Receipt this Period	<input type="text"/> 255.00
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 255.00

B.	Full Name (Last, First, Middle Initial) Mr. Tom Mikesell		Date of Receipt
	Mailing Address P.O. Box 1020		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Craig	CO	81626-1020
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02507
		Amount of Each Receipt this Period	<input type="text"/> 400.00
Name of Employer Self-Employed		Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 400.00

C.	Full Name (Last, First, Middle Initial) Mrs. Teresa Milan		Date of Receipt
	Mailing Address P.O. Box 446		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 13 / 2009
	City	State	Zip Code
	Ponte Vedra Beach	FL	32004-0446
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02508
		Amount of Each Receipt this Period	<input type="text"/> 250.00
Name of Employer Na		Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 905.00
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 843 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert H. Milbrath

Mailing Address 5200 S.W. 25Th Blvd.
Unit 3221

City State Zip Code
Gainesville FL 32608-8923

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai02509

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert H. Milbrath

Mailing Address 5200 S.W. 25Th Blvd.
Unit 3221

City State Zip Code
Gainesville FL 32608-8923

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai02510

Amount of Each Receipt this Period
105.00

C.

Full Name (Last, First, Middle Initial)
Mr. James Milgard

Mailing Address P.O. Box 8690

City State Zip Code
Ketchum ID 83340-7160

FEC ID number of contributing federal political committee. **C**

Name of Employer Great Day Group L.L.C. Occupation Private Equity

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai02511

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶

705.00

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 844 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Adeline Miller

Mailing Address P.O. Box 34

City State Zip Code
Rodeo NM 88056-0034

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: 2009M04L11ai02512

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Adeline Miller

Mailing Address P.O. Box 34

City State Zip Code
Rodeo NM 88056-0034

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02513

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)

Mr. Arthur Miller

Mailing Address 210 Valley Club Circle

City State Zip Code
Little Rock AR 72212-2914

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 1 / 2 0 0 9

Transaction ID: 2009M04L11ai02514

Amount of Each Receipt this Period
300.00

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 845 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. C. Douglas Miller		Date of Receipt
	Mailing Address 9 Laurel Hill Court		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bluffton	SC	29910-4918
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai02515
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. David J. Miller		Date of Receipt
	Mailing Address 261 6Th Street		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Silvis	IL	61282-1125
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai02516
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="235.00"/>	<input type="text" value="100.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Duane Miller		Date of Receipt
	Mailing Address 9 Winding Way		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wilmington	DE	19807-1749
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai02517
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="600.00"/>	<input type="text" value="100.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1200.00"/>
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 846 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Elizabeth S. Miller		Date of Receipt
	Mailing Address 16614 Lafone Dr		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Spring	TX	77379-7507
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Requested		Occupation Requested	Transaction ID: 2009M04L11ai02518
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="630.00"/>	
<input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period
			<input type="text" value="300.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Henry S. Miller		Date of Receipt
	Mailing Address 250 Park Avenue		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	New York	NY	10177-0073
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Miller Buckfire & Company, L.L.C.		Occupation Investment Banker	Transaction ID: 2009M04L11ai02519
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="30400.00"/>	
<input type="checkbox"/> Other (specify) ▼			Amount of Each Receipt this Period
			<input type="text" value="30400.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. James C. Miller		Date of Receipt
	Mailing Address 103 Trio Court		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Holly Hill	FL	32117-4937
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Disabled		Occupation Disabled	Transaction ID: 2009M04L11ai02520
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) ▼			Amount of Each Receipt this Period
			<input type="text" value="30.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="30730.00"/>
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 847 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. James C. Miller

Mailing Address 103 Trio Court

City State Zip Code
Holly Hill FL 32117-4937

FEC ID number of contributing federal political committee. **C**

Name of Employer Disabled Occupation Disabled

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2009

Transaction ID: 2009M04L11ai02521

Amount of Each Receipt this Period

5.00

B.

Full Name (Last, First, Middle Initial)
Mr. James M. Miller

Mailing Address 12444 Highfield Circle

City State Zip Code
Lakewood Ranch FL 34202-7909

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Philanthropist

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai02522

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Prof. John B. Miller

Mailing Address 40 Westland Avenue

City State Zip Code
Winchester MA 01890-3472

FEC ID number of contributing federal political committee. **C**

Name of Employer Patton Boggs L.L.P. Occupation Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02523

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1005.00

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 848 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Lester C. Miller	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address P.O. Box 343	Transaction ID: 2009M04L11ai02524
	City State Zip Code Goodwell OK 73939-0343	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Lisa A. Miller	Date of Receipt MM / DD / YYYY 03 / 04 / 2009
	Mailing Address 14806 Donna Lane	Transaction ID: 2009M04L11ai02525
	City State Zip Code Crosby TX 77532-6040	Amount of Each Receipt this Period 220.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Margaret Miller	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 9 Pleasant Hill Drive	Transaction ID: 2009M04L11ai02526
	City State Zip Code Rolling Hills Esta CA 90274-1521	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Self Employed	Occupation Self Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	770.00
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 849 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Mark I. Miller

Mailing Address 40 Overlook Road

City State Zip Code
Livingston NJ 07039-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer Consultants Occupation Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 270.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai02527

Amount of Each Receipt this Period
270.00

B.

Full Name (Last, First, Middle Initial)
Dr. Maynard M. Miller

Mailing Address 514 E. 1St Street

City State Zip Code
Moscow ID 83843-2814

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Idaho Occupation Geologist & Professor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai02528

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Dr. Maynard M. Miller

Mailing Address 514 E. 1St Street

City State Zip Code
Moscow ID 83843-2814

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Idaho Occupation Geologist & Professor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 340.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai02529

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional) ▶

410.00

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 850 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Paul R. Miller	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 6738 S. Russellville Road	Transaction ID: 2009M04L11ai02530
	City State Zip Code Franktown CO 80116-8304	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Randall Miller	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 8412 Telegraph Road	Transaction ID: 2009M04L11ai02531
	City State Zip Code Lorton VA 22079-1306	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Department of Transportation Occupation Federal Employee Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert E. Miller	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 16011 Kinmont Court	Transaction ID: 2009M04L11ai02532
	City State Zip Code Spring TX 77379-6839	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
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 851 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Virgie Miller

Mailing Address 4895 Convair Drive

City Carson City State NV Zip Code 89706-0492

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02533

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Wilton E. Miller

Mailing Address 1720 Calle Laguna

City Arroyo Grande State CA Zip Code 93420-5972

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02534

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Theresa K. Milligan

Mailing Address 5712 Meadow Wood Lane

City Fort Worth State TX Zip Code 76112-3034

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02535

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ► **1470.00**

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 852 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Harry L. Million

Mailing Address 421 S. 30Th Street

City Philomath State OR Zip Code 97370-9372

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai02536

Amount of Each Receipt this Period 70.00

B. Full Name (Last, First, Middle Initial)
Mr. Harry L. Million

Mailing Address 421 S. 30Th Street

City Philomath State OR Zip Code 97370-9372

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai02537

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Billy J. Millis

Mailing Address 2502 Barkwood Drive

City Austin State TX Zip Code 78748-6006

FEC ID number of contributing federal political committee. **C**

Name of Employer USAF Occupation Many Long Years Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai02538

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 220.00

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 853 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Billy J. Millis

Mailing Address 2502 Barkwood Drive

City State Zip Code
Austin TX 78748-6006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USAF Many Long Years Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02539

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Billy J. Millis

Mailing Address 2502 Barkwood Drive

City State Zip Code
Austin TX 78748-6006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
USAF Many Long Years Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02540

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Rick J. Mills

Mailing Address 9365 Smithson Ln.

City State Zip Code
Brentwood TN 37027-8747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai02541

Amount of Each Receipt this Period
300.00

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 854 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Mollie W. Milne
Mailing Address 4202 N. 79Th St.
City State Zip Code
Scottsdale AZ 85251-4117
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai02542
Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Ms. Laure L. Mineo
Mailing Address 7322 Donaldson Dr.
City State Zip Code
Gonzales LA 70737-8169
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Homemaker Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai02543
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert N. Minich
Mailing Address 8303 Decoy Run
City State Zip Code
Manlius NY 13104-9324
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai02544
Amount of Each Receipt this Period 300.00

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 855 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David S. Minton

Mailing Address 7949 Mc Kaig Road

City State Zip Code
Frederick MD 21701-8912

FEC ID number of contributing federal political committee. **C**

Name of Employer: Housing Opportunities Commission
Occupation: Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt: MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai02545

Amount of Each Receipt this Period: 245.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert M. Minton

Mailing Address 1204 N. Marshall

City State Zip Code
Henderson TX 75652-5624

FEC ID number of contributing federal political committee. **C**

Name of Employer: Self-Employed
Occupation: Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02546

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Jim L Mirkes

Mailing Address 1201 Placid Ave

City State Zip Code
Plano TX 75074

FEC ID number of contributing federal political committee. **C**

Name of Employer: Merit Contractors, Inc.
Occupation: Construction

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02547

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1245.00

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 856 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Joseph L. Mistretta, Jr.		Date of Receipt
	Mailing Address 27229 SW Aden Avenue		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wilsonville	OR	97070-6560
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02548
		Amount of Each Receipt this Period	<input type="text" value="250.00"/>
Name of Employer Self-Employed		Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Cecil Darrel Mitchell		Date of Receipt
	Mailing Address 900 W. Vandever Blvd.		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Broken Arrow	OK	74012-7667
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02549
		Amount of Each Receipt this Period	<input type="text" value="250.00"/>
Name of Employer Self-Employed		Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. John B. Mitchell		Date of Receipt
	Mailing Address 7803 Elm Tree Ct		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Sugar Land	TX	77479-6404
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02550
		Amount of Each Receipt this Period	<input type="text" value="100.00"/>
Name of Employer Acute Technological Services		Occupation Ceo	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="350.00"/>

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: PAGE 857 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Norris Mitchell		Date of Receipt
	Mailing Address P.O. Box 311		<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Mc Lean	VA	22101-0311
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai02551
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Scott Mitchell		Date of Receipt
	Mailing Address 8500 Clarendon Drive		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Evansville	IN	47725-7494
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer The Heart Group		Occupation Pa	Transaction ID: 2009M04L11ai02552
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Mrs. Janet Mixon		Date of Receipt
	Mailing Address 206 Oak Ave P.O. Box 1729		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Anna Maria	FL	34216
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Mixon Fruit Farms, Inc.		Occupation Owner	Transaction ID: 2009M04L11ai02553
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<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 858 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. June T. Miyagishima

Mailing Address 1300 University Street
Apartment 2A

City State Zip Code
Seattle WA 98101-2804

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02554

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Mary Jo & Randy Mizer

Mailing Address 3210 Julian Avenue

City State Zip Code
Long Beach CA 90808-4448

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai02555

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Jack E. Mobley

Mailing Address P.O. Box 596

City State Zip Code
Deer Park TX 77536-0596

FEC ID number of contributing federal political committee. **C**

Name of Employer Mobley Industrial Painters Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai02556

Amount of Each Receipt this Period
250.00

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 859 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Carl B. Mockensturm

Mailing Address 7913 Lookout Circle

City State Zip Code
Monclova OH 43542-8314

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai02557

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Carl B. Mockensturm

Mailing Address 7913 Lookout Circle

City State Zip Code
Monclova OH 43542-8314

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02558

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Armin J. Moeller, Jr.

Mailing Address P.O. Box 22587

City State Zip Code
Jackson MS 39225-2587

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai02559

Amount of Each Receipt this Period
275.00

SUBTOTAL of Receipts This Page (optional) ► **1375.00**

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 860 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Delores Moelter
Mailing Address P.O. Box 1653
City State Zip Code
La Quinta CA 92247-1653
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai02560
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Ms. Delores Moelter
Mailing Address P.O. Box 1653
City State Zip Code
La Quinta CA 92247-1653
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai02561
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Delores Moelter
Mailing Address P.O. Box 1653
City State Zip Code
La Quinta CA 92247-1653
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai02562
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 861 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert M. Mohr
Mailing Address 16 Viejo Way
City Novato State CA Zip Code 94945-1338
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai02563
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert M. Mohr
Mailing Address 16 Viejo Way
City Novato State CA Zip Code 94945-1338
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai02564
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Luis Mola
Mailing Address 2509 Castilla Island
City Fort Lauderdale State FL Zip Code 33301-1580
FEC ID number of contributing federal political committee. **C**
Name of Employer D.M.E. Corporation Occupation Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai02565
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00
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 862 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Ray Molczyk
Mailing Address P.O. Box 105
City Spalding State NE Zip Code 68665-0105
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai02566
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Peter E. Moll
Mailing Address 2001 Whiteoaks Drive
City Alexandria State VA Zip Code 22306-2432
FEC ID number of contributing federal political committee. **C**
Name of Employer Howrey, L.L.P. Occupation Attorney
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02567
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Jeremy J. Mollison
Mailing Address 201 S. 18Th Street Rittenhouse Claridge #1407
City Philadelphia State PA Zip Code 19103-5957
FEC ID number of contributing federal political committee. **C**
Name of Employer Pennsylvania Real Estate Inves Occupation Real Estate
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai02568
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 863 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Patricia Mondello
Mailing Address 153 Meadow Lane
City New Rochelle State NY Zip Code 10805-2345
FEC ID number of contributing federal political committee. **C**
Name of Employer Grassl Development Corp. Occupation Book Keeper
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00
Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai02569
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Ms. Patricia Mondello
Mailing Address 153 Meadow Lane
City New Rochelle State NY Zip Code 10805-2345
FEC ID number of contributing federal political committee. **C**
Name of Employer Grassl Development Corp. Occupation Book Keeper
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 700.00
Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai02570
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. L. Monroe
Mailing Address 1010 Walker Ford Road
City Maynardville State TN Zip Code 37807-4137
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02571
Amount of Each Receipt this Period 125.00

SUBTOTAL of Receipts This Page (optional) ▶ 525.00
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 864 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William A. Monroe

Mailing Address 4124 Shadow Drive

City State Zip Code
Fort Worth TX 76116-8129

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Jetta Operating Company Petroleum Geologist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02572

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. Ramon G. Montes

Mailing Address 16240 N. 56Th Way

City State Zip Code
Scottsdale AZ 85254-9212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Banner Health System Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02573

Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald M. Montgomery

Mailing Address P.O. Box 908
7211 Scatter View Lane

City State Zip Code
Rochester WA 98579-0908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02574

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► **625.00**

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 865 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Donald M. Montgomery

Mailing Address P.O. Box 908
7211 Scatter View Lane

City State Zip Code
Rochester WA 98579-0908

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02575

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald M. Montgomery

Mailing Address P.O. Box 908
7211 Scatter View Lane

City State Zip Code
Rochester WA 98579-0908

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02576

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald M. Montgomery

Mailing Address P.O. Box 908
7211 Scatter View Lane

City State Zip Code
Rochester WA 98579-0908

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai02577

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► 200.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 866 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John R. Montgomery, II

Mailing Address 901 Hillsboro Mile

City Hillsboro Beach State FL Zip Code 33062-2801

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai02578

Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Michael Montgomery

Mailing Address 1488 Key Lane

City Abilene State TX Zip Code 79602-7610

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Associates Occupation M.D.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai02579

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Dr. Wally O. Montgomery

Mailing Address 117 N. 2Nd Street Suite 202

City Paducah State KY Zip Code 42001-0743

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai02580

Amount of Each Receipt this Period 305.00

SUBTOTAL of Receipts This Page (optional) ► 1555.00

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 867 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Arlene Moody

Mailing Address 15101 Delahunty Lane

City Pflugerville State TX Zip Code 78660-3344

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Office Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY 03 / 06 / 2009

Transaction ID: 2009M04L11ai02581

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas R. Mooney

Mailing Address 524 Manzanita St.

City Chula Vista State CA Zip Code 91911-2507

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Unsn (Ret)

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY 03 / 06 / 2009

Transaction ID: 2009M04L11ai02582

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Ms. Annette Moore

Mailing Address 2019 Florinda Street

City Sarasota State FL Zip Code 34231-3417

FEC ID number of contributing federal political committee. **C**

Name of Employer Master Graphics, Inc. Occupation Printing & Graphics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: MM / DD / YYYY 03 / 23 / 2009

Transaction ID: 2009M04L11ai02583

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 850.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 868 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Anthony Moore

Mailing Address 3203 Cornell Avenue

City State Zip Code
Dallas TX 75205-2933

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02584

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Arthur Dale Moore

Mailing Address 1623 Peerman School Road

City State Zip Code
Altavista VA 24517-4099

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02585

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Carolyn J Moore

Mailing Address 604 Royal Oaks

City State Zip Code
Friendswood TX 77546-7006

FEC ID number of contributing federal political committee. **C**

Name of Employer Brand Iq, Inc. Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02586

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 869 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John M. Moore

Mailing Address P.O. Box 269

City State Zip Code
Saluda VA 23149-0269

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02587

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Matthew P. Moore

Mailing Address 1619 167Th Avenue N.E.

City State Zip Code
Bellevue WA 98008-2909

FEC ID number of contributing federal political committee. **C**

Name of Employer Seagull Scientific, Inc. Occupation Software Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02588

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Norman Moore

Mailing Address 272 Hamakua Dr

City State Zip Code
Kailua HI 96734

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. Navy Occupation Military

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02589

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 870 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Sandra C. Moore

Mailing Address 14301 Albers Street

City State Zip Code
Sherman Oaks CA 91401-5105

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai02590

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Stephen F. Moore

Mailing Address 1019 Lake Colonial Drive

City State Zip Code
Arrington TN 37014-9746

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
T.B.A. Corporation Marketing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai02591

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. William B. Moore

Mailing Address 3830 Dutch Hollow Lane

City State Zip Code
Pacific MO 63069-2556

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai02592

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 871 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Jorge A. Morales

Mailing Address P.O. Box 1899

City State Zip Code
Dubois WY 82513-1899

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai02593

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Orlando Morales Montero, Sr.

Mailing Address 4960 S.W. 128Th Avenue

City State Zip Code
Miramar FL 33027-5828

FEC ID number of contributing federal political committee. **C**

Name of Employer Hilton Hotel Airport Tower Occupation Server

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai02594

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Donna Moran

Mailing Address 1239 Cricket Drive N.E.

City State Zip Code
Palm Bay FL 32907-2219

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02595

Amount of Each Receipt this Period
50.00

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 872 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Donna Moran
Mailing Address 1239 Cricket Drive N.E.
City State Zip Code
Palm Bay FL 32907-2219
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.00
Date of Receipt M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 9
Transaction ID: 2009M04L11ai02596
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Joe E. Moreland
Mailing Address P. O. Box 430
City State Zip Code
Osawatomie KS 66064-0430
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9
Transaction ID: 2009M04L11ai02597
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Harold Morgan
Mailing Address 119 Robert E. Lee Boulevard
City State Zip Code
Vicksburg MS 39183-8728
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9
Transaction ID: 2009M04L11ai02598
Amount of Each Receipt this Period 220.00

SUBTOTAL of Receipts This Page (optional) ► 1270.00
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 873 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Patricia B. Morgan

Mailing Address 5 Stonegate Drive

City Belleair State FL Zip Code 33756-1687

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai02599

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Timothy Morgan

Mailing Address 11202 Valley Stream

City Houston State TX Zip Code 77043-4623

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 04 / 2009

Transaction ID: 2009M04L11ai02600

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Timothy Morgan

Mailing Address 11202 Valley Stream

City Houston State TX Zip Code 77043-4623

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 25 / 2009

Transaction ID: 2009M04L11ai02601

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 874 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles J. Mormino

Mailing Address 8811 Gaylord

City State Zip Code
Houston TX 77024

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02602

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Mr. James F. Morrill

Mailing Address 200 Palm Circle

City State Zip Code
Lake Worth FL 33462-6629

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02603

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
Mrs. April Morris

Mailing Address 2167 Vestibule Church Road

City State Zip Code
Kings Mountain NC 28086-9129

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02604

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► **910.00**

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 875 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. I. A. Morris, Jr.		Date of Receipt
	Mailing Address 2867 Outlet Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 11 / 2009
	City	State	Zip Code
	Clifton Springs	NY	14432-9742
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02605
		Amount of Each Receipt this Period	<input type="text"/> 1000.00
Name of Employer G.W. LISK COMPANY, INC.		Occupation BOARD CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

B.	Full Name (Last, First, Middle Initial) Mr. I. A. Morris, Jr.		Date of Receipt
	Mailing Address 2867 Outlet Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Clifton Springs	NY	14432-9742
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02606
		Amount of Each Receipt this Period	<input type="text"/> 2000.00
Name of Employer G.W. LISK COMPANY, INC.		Occupation BOARD CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

C.	Full Name (Last, First, Middle Initial) Robert Morris		Date of Receipt
	Mailing Address 307 Beach Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2009
	City	State	Zip Code
	Destin	FL	32541
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02607
		Amount of Each Receipt this Period	<input type="text"/> 250.00
Name of Employer Self		Occupation Ret.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3250.00
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 876 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Helen D Morrison

Mailing Address 234 Twelfth Street, S.E.

City Washington State DC Zip Code 20003-1428

FEC ID number of contributing federal political committee. **C**

Name of Employer Arnold & Porter Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2009

Transaction ID: 2009M04L11ai02608

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Helen D Morrison

Mailing Address 234 Twelfth Street, S.E.

City Washington State DC Zip Code 20003-1428

FEC ID number of contributing federal political committee. **C**

Name of Employer Arnold & Porter Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 06 / 2009

Transaction ID: 2009M04L11ai02609

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael Morrison

Mailing Address 15239 Newburgh Rd

City Livonia State MI Zip Code 48154-5038

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2009

Transaction ID: 2009M04L11ai02610

Amount of Each Receipt this Period
 115.00

SUBTOTAL of Receipts This Page (optional) ► **415.00**

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 877 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. C. Richard Morrow

Mailing Address 1737 Highway 61

City Wever State IA Zip Code 52658-9554

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt 03 / 19 / 2009

Transaction ID: 2009M04L11ai02611

Amount of Each Receipt this Period 255.00

B. Full Name (Last, First, Middle Initial)
Mrs. Fern L. Morse

Mailing Address 316 Center Street

City Vermillion State SD Zip Code 57069-2116

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai02612

Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Davis Mortensen

Mailing Address 1661 Snug Harbor Drive

City Greensboro State GA Zip Code 30642-3735

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai02613

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 555.00

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 878 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. William S. Mortensen	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 559 Almoloya Drive	Transaction ID: 2009M04L11ai02614
	City State Zip Code Pacific Palisades CA 90272-4426	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Ms. Lynda S. Moscatello	Date of Receipt MM / DD / YYYY 03 / 18 / 2009
	Mailing Address R.R. 6 Box 6198C	Transaction ID: 2009M04L11ai02615
	City State Zip Code Stroudsburg PA 18360-8537	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Penson Creek Financial Service, Inc. Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. John A. Moseley	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 4403 Via Abridada	Transaction ID: 2009M04L11ai02616
	City State Zip Code Santa Barbara CA 93110-2301	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1750.00
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 879 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Mr. Richard Mott		Date of Receipt
Mailing Address P.O. Box 400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Rainier WA 98576-0400		<input type="text"/> 03 / <input type="text"/> 03 / <input type="text"/> 2009
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: 2009M04L11ai02617
Name of Employer Occupation Potielco I.N.C. Engineer		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 75.00
Aggregate Year-to-Date ▼ <input type="text"/> 225.00		

B.

Full Name (Last, First, Middle Initial) Mr. Richard Mott		Date of Receipt
Mailing Address P.O. Box 400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Rainier WA 98576-0400		<input type="text"/> 03 / <input type="text"/> 12 / <input type="text"/> 2009
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: 2009M04L11ai02618
Name of Employer Occupation Potielco I.N.C. Engineer		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 75.00
Aggregate Year-to-Date ▼ <input type="text"/> 225.00		

C.

Full Name (Last, First, Middle Initial) Mr. Vernon B. Mountcastle		Date of Receipt
Mailing Address 6605 Walnutwood Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Baltimore MD 21212-1214		<input type="text"/> 03 / <input type="text"/> 06 / <input type="text"/> 2009
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: 2009M04L11ai02619
Name of Employer Occupation Retired Retired		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 1000.00
Aggregate Year-to-Date ▼ <input type="text"/> 1000.00		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1150.00
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 880 / 1945
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial) Paraskevi Mourkakos		Date of Receipt MM / DD / YYYY 03 / 06 / 2009
Mailing Address 3273 32Nd Street		Transaction ID: 2009M04L11ai02620
City Astoria	State NY	Zip Code 11106-2644
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

B.

Full Name (Last, First, Middle Initial) Dr. Frank Moya		Date of Receipt MM / DD / YYYY 03 / 03 / 2009
Mailing Address 5915 Ponce De Leon Blvd. Suite 19		Transaction ID: 2009M04L11ai02621
City Coral Gables	State FL	Zip Code 33146-2435
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.

Full Name (Last, First, Middle Initial) Mr. Buford Moyers		Date of Receipt MM / DD / YYYY 03 / 11 / 2009
Mailing Address 1008 Little League Road		Transaction ID: 2009M04L11ai02622
City Princeton	State LA	Zip Code 71067-8393
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Country Kitchen	Occupation Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	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 881 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard Mueller

Mailing Address 1 US Bank Plz

City State Zip Code
Saint Louis MO 63101-1612

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02623

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard Mueller

Mailing Address 1 US Bank Plz

City State Zip Code
Saint Louis MO 63101-1612

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02624

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard L. Mueller

Mailing Address 432 Ridgewood Avenue

City State Zip Code
Glen Ellyn IL 60137-4918

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02625

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 882 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth J. Muellner

Mailing Address 3558 N. Rutherford Avenue

City State Zip Code
Chicago IL 60634-3710

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation
Law Enforcement

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02626

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Germano Mularoni

Mailing Address 32540 Schoolcraft Road
Suite 1

City State Zip Code
Livonia MI 48150-4305

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02627

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Dr. Donald J. Muller

Mailing Address 204 Rochester Road

City State Zip Code
Mobile AL 36608-2219

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai02628

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 883 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Delno V. Mullins

Mailing Address 13223 Palmers Creek Terrace

City State Zip Code
Bradenton FL 34202-5006

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02629

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Ms. Judy Mullins

Mailing Address 340 Hidden Creek Circle

City State Zip Code
Spartanburg SC 29306-6672

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02630

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Gerald A. Mulrooney

Mailing Address 629 South Ridge Road

City State Zip Code
Cedar City UT 84720-2900

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02631

Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ► 950.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 884 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Jorge Munilla
Mailing Address 7231 Sunset Drive
City Miami State FL Zip Code 33143-4248
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai02632
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Harvey E. Munsch
Mailing Address 1215 Rita Circle
City San Angelo State TX Zip Code 76905-4201
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai02633
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Jay H. Murdock
Mailing Address 755 Castle Boulevard
City Akron State OH Zip Code 44313-5709
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai02634
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 885 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Roy Murdock
Mailing Address P.O. Box 21107
City State Zip Code
Spattle WA 98111-3107
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02635
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Ms. Susan H. Murphree
Mailing Address 105 Forest Terrace
City State Zip Code
Troy AL 36081-1621
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Homemaker Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai02636
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Edward Murphy
Mailing Address 18 Meritoria Drive
City State Zip Code
East Williston NY 11596-2005
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai02637
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00
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 886 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Dr. James P. Murphy

Mailing Address 2970 Broxton Lane

City State Zip Code
York PA 17402-3823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Yorktowne Business Institute President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02638

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)

Dr. Paul T. Murphy

Mailing Address 20748 6th Ave West

City State Zip Code
Summerland Key FL 33042-4010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Health Management Associates Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 2009M04L11ai02639

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)

Ms. Geneva J. Murray

Mailing Address 3518 29th Avenue

City State Zip Code
Temple Hills MD 20748-1234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 2 / 2 0 0 9

Transaction ID: 2009M04L11ai02640

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

800.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 887 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. George E. Murray

Mailing Address 2621 Spalding Drive

City State Zip Code
Las Vegas NV 89134-7551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai02641

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. James C. Murray, II

Mailing Address 700 E. Main Street
Suite E.

City State Zip Code
Saint Charles IL 60174-2200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai02642

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Ms. Sharon Muzik

Mailing Address 791 Wittelsbach Drive
Apt B.

City State Zip Code
Dayton OH 45429-6256

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Booz-Allen Hamilton, Inc. Vice President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai02643

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 888 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Beatrice Myers

Mailing Address 8919 Park Road
Apartment 7014

City State Zip Code
Charlotte NC 28210-7629

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02644

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Bradley W. Myers

Mailing Address 1220 Boland Place

City State Zip Code
Richmond Heights MO 63117-1458

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai02645

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles J. Myers

Mailing Address 1612 Tiffany Drive

City State Zip Code
Pittsburgh PA 15241-3269

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02646

Amount of Each Receipt this Period
100.00

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 889 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James Myers

Mailing Address 136 Whitetail Drive

City Harrison City State PA Zip Code 15636-1430

FEC ID number of contributing federal political committee. **C**

Name of Employer Newton Consulting, L.L.C. Occupation Chief Operating Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 17 / 2009
Transaction ID: 2009M04L11ai02647
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Mr. James Myers

Mailing Address 136 Whitetail Drive

City Harrison City State PA Zip Code 15636-1430

FEC ID number of contributing federal political committee. **C**

Name of Employer Newton Consulting, L.L.C. Occupation Chief Operating Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02648
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Steven Myers

Mailing Address Pob 852, 46320 Ten Mile Rd

City Novi State MI Zip Code 48376-0852

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai02649
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 890 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William P. Naff

Mailing Address 1831 Rendy Road

City State Zip Code
New Smyrna FL 32168-5428

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02650

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. David Nagel

Mailing Address 6229 Nagel Road
P.O. Box 340

City State Zip Code
Preston MD 21655-0340

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 401.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02651

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Eleanor & E.J. Nagele

Mailing Address 1652 Lightwood Road

City State Zip Code
Hartwell GA 30643-4016

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02652

Amount of Each Receipt this Period
250.00

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 891 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kevin M. Nagle

Mailing Address 960 Villa Del Sol

City State Zip Code
El Dorado Hills CA 95762-3568

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Envision Insurance Company President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02653

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
Mr. Derek Naiser

Mailing Address 104 Summer Glen

City State Zip Code
Boerne TX 78006-6090

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02654

Amount of Each Receipt this Period
205.00

C. Full Name (Last, First, Middle Initial)
Mr. Nagy N. Najjar

Mailing Address 2120 Lundy Lake Drive

City State Zip Code
Escondido CA 92029-5439

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02655

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **3705.00**

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 892 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Nagy N. Najjar

Mailing Address 2120 Lundy Lake Drive

City Escondido State CA Zip Code 92029-5439

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai02656

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Jim & Leane Nakis

Mailing Address 16218 Gamay Drive

City Plainfield State IL Zip Code 60586-5969

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Chiropractor / Small Business

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai02657

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. John Nalbone, Jr.

Mailing Address 136 Lakeview Avenue

City Fredonia State NY Zip Code 14063-1973

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai02658

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional) ► 975.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 893 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Allan Nappen

Mailing Address 143 Bayhill Drive

City State Zip Code
Blue Bell PA 19422-3264

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Nappen & Associates Real Estate Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai02659

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mrs. Naomi M. Nash

Mailing Address 4731 Ridgeview Court

City State Zip Code
Wisconsin WI 54494-6778

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02660

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Dr. Salah Nasser

Mailing Address 40 Brookside Drive

City State Zip Code
Athens PA 18810-8900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Guthrie Clinic Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02661

Amount of Each Receipt this Period
135.00

SUBTOTAL of Receipts This Page (optional) ► **485.00**

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 894 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Andrzej M. Natkaniec

Mailing Address 6067 60Th Avenue

City Maspeth State NY Zip Code 11378-3458

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: 2009M04L11ai02662
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Huel S. Neal

Mailing Address 5794 Potato Farm Road

City Crossville State TN Zip Code 38571-0777

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt: 03 / 04 / 2009
Transaction ID: 2009M04L11ai02663
Amount of Each Receipt this Period: 105.00

C. Full Name (Last, First, Middle Initial)
Mr. Lester Neal

Mailing Address 305 2Nd Street W.

City Roundup State MT Zip Code 59072-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 890.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai02664
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ▶ **455.00**

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 895 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lester Neal

Mailing Address 305 2Nd Street W.

City Roundup State MT Zip Code 59072-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 890.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai02665
 Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Lester Neal

Mailing Address 305 2Nd Street W.

City Roundup State MT Zip Code 59072-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 890.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai02666
 Amount of Each Receipt this Period: 75.00

C. Full Name (Last, First, Middle Initial)
Mr. Lester Neal

Mailing Address 305 2Nd Street W.

City Roundup State MT Zip Code 59072-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 890.00

Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai02667
 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 896 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lester Neal

Mailing Address 305 2Nd Street W.

City Roundup State MT Zip Code 59072-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 890.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai02668

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. William W. Neal, III

Mailing Address 5106 Oxford Crescent Court

City Charlotte State NC Zip Code 28226-3321

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai02669

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. George M. Neall, II

Mailing Address 5452 Tates Bank Road

City Cambridge State MD Zip Code 21613-3421

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai02670

Amount of Each Receipt this Period 1500.00

SUBTOTAL of Receipts This Page (optional) ► 1650.00

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 897 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Joan Kelly Nebel

Mailing Address 660 Lambert Avenue

City State Zip Code
Flagler Beach FL 32136-3213

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	9

Transaction ID: 2009M04L11ai02671

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. William C. Needham

Mailing Address 9953 Knollbrook Terrace

City State Zip Code
Cincinnati OH 45242-6407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Ret.

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	0		2	0	0	9

Transaction ID: 2009M04L11ai02672

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. William C. Needham

Mailing Address 9953 Knollbrook Terrace

City State Zip Code
Cincinnati OH 45242-6407

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Ret.

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	4		2	0	0	9

Transaction ID: 2009M04L11ai02673

Amount of Each Receipt this Period
50.00

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 898 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William C. Needham

Mailing Address 9953 Knollbrook Terrace

City State Zip Code
Cincinnati OH 45242-6407

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02674

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Ms. Alice T. Neel

Mailing Address 4106 Tarlac Drive

City State Zip Code
San Antonio TX 78239-3072

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
760.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02675

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Dr. Mallappa Neelappa

Mailing Address 2275 S. Elks Lane

City State Zip Code
Yuma AZ 85364-6104

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02676

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

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 899 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Bill V. Neff

Mailing Address 350 University Boulevard

City Harrisonburg State VA Zip Code 22801-3755

FEC ID number of contributing federal political committee. **C**

Name of Employer COMMERCIAL REAL ESTATE DE-VEL. Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai02677
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Carl Anthony Neff

Mailing Address 8187 State Route 43

City Streetsboro State OH Zip Code 44241-5864

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt: 03 / 05 / 2009
Transaction ID: 2009M04L11ai02678
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mr. George E. Neher

Mailing Address 6507 Deerpath Court

City Lisle State IL Zip Code 60532-3309

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02679
Amount of Each Receipt this Period: 100.00

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 900 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Kelly Neil

Mailing Address 114 Inez Place

City State Zip Code
Mill Valley CA 94941-2411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bai, Llc Realtor

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai02680

Amount of Each Receipt this Period
750.00

B.

Full Name (Last, First, Middle Initial)
Mr. Kelly Neil

Mailing Address 114 Inez Place

City State Zip Code
Mill Valley CA 94941-2411

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bai, Llc Realtor

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 800.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02681

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Charmean L. Neithart

Mailing Address 1450 Lomita Drive

City State Zip Code
Pasadena CA 91106-4341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai02682

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

1300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 901 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Charmean L. Neithart

Mailing Address 1450 Lomita Drive

City Pasadena State CA Zip Code 91106-4341

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai02683

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steven Neitz

Mailing Address 15213 Bannon Hill Court

City Chantilly State VA Zip Code 20151-1314

FEC ID number of contributing federal political committee. **C**

Name of Employer Zeta Associates Occupation Software Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai02684

Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Ms. Julieann Nelson

Mailing Address 4406 Lively Lane

City Dallas State TX Zip Code 75220-2006

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai02685

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 902 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth Nelson

Mailing Address 219 Riverview Road

City Ottertail State MN Zip Code 56571-7018

FEC ID number of contributing federal political committee. **C**

Name of Employer K.L.N Enterprises Occupation President & Ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai02686
 Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Obert B. Nelson

Mailing Address 4406 Lively Ln.

City Dallas State TX Zip Code 75220-2006

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 510.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai02687
 Amount of Each Receipt this Period: 510.00

C. Full Name (Last, First, Middle Initial)
Dr. Iris Nemhauser

Mailing Address 1412 9th Ave NE

City Rochester State MN Zip Code 55906-7006

FEC ID number of contributing federal political committee. **C**

Name of Employer Mayo Clinic Occupation Programmer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai02688
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 1560.00

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 903 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Iris Nemhauser

Mailing Address 1412 9th Ave NE

City State Zip Code
Rochester MN 55906-7006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mayo Clinic Programmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02689

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Penny L Nemitz

Mailing Address P.O. Box 183

City State Zip Code
Grafton OH 44044-0183

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bowling Green Educator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02690

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Betty Deloras Neuman

Mailing Address 1241 Central Avenue

City State Zip Code
Mayo MD 21106

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai02691

Amount of Each Receipt this Period
210.00

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 904 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Gregory R. New

Mailing Address 2755 Ordway Street N.W.
Apartment 405

City State Zip Code
Washington DC 20008-5005

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 0 9

Transaction ID: 2009M04L11ai02692

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. John Newcomb

Mailing Address 15643 Compass Drive

City State Zip Code
Northport AL 35475-3923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W. Alabama Family Physi-
cians, P. C. Physician

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1050.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: 2009M04L11ai02693

Amount of Each Receipt this Period
1050.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bryan S. Newell

Mailing Address 35212 Clear Pond Rd.

City State Zip Code
Shawnee OK 74801-2654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ess, Newell Oil and Gas Owner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai02694

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

1800.00

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 905 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. William Newfield

Mailing Address 3332 Venture Drive

City State Zip Code
Huntington Beach CA 92649-2551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Intertrade Aviation Corporation Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai02695

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Scott Newhart

Mailing Address 7095 Bottle Bay Road

City State Zip Code
Sagle ID 83860-9041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai02696

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Scott Newhart

Mailing Address 7095 Bottle Bay Road

City State Zip Code
Sagle ID 83860-9041

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai02697

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 906 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Harry Newman
 Mailing Address 1226 Dosett Street
 City Athens State TN Zip Code 37303
 Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai02698
 Amount of Each Receipt this Period 210.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

B. Full Name (Last, First, Middle Initial)
Mr. Ned Newman
 Mailing Address P.O. Box 778407
 City Henderson State NV Zip Code 89077-1250
 Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai02699
 Amount of Each Receipt this Period 200.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired - Boeing Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

C. Full Name (Last, First, Middle Initial)
Mr. Ned Newman
 Mailing Address P.O. Box 778407
 City Henderson State NV Zip Code 89077-1250
 Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai02700
 Amount of Each Receipt this Period 110.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired - Boeing Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 310.00

SUBTOTAL of Receipts This Page (optional) ► 520.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 907 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Carroll F. Newsom

Mailing Address P.O. Box 50665

City State Zip Code
Amarillo TX 79159-0665

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai02701

Amount of Each Receipt this Period
115.00

B.

Full Name (Last, First, Middle Initial)

Mr. Monte L. Newsom

Mailing Address 2817 Chama Street N. E.

City State Zip Code
Albuquerque NM 87110-3554

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai02702

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)

Mr. Wilbert F. Newton

Mailing Address 23812 Salvador Bay

City State Zip Code
Dana Point CA 92629-4207

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02703

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

465.00

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 908 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Thanhlong T. Nguyen

Mailing Address 8292 Westminster Blvd.

City State Zip Code
Westminster CA 92683-3347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Civic Dental Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai02704

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Bruce S. Nicholas

Mailing Address 40 Howard Road

City State Zip Code
Greenwich CT 06831-3104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02705

Amount of Each Receipt this Period
800.00

C. Full Name (Last, First, Middle Initial)
Mr. Don E. Nicholas

Mailing Address P.O. Box 4586

City State Zip Code
Jackson MS 39296-4586

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02706

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ► **1160.00**

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 909 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Frank Nichols, Jr.

Mailing Address 534 Oak Harbour Drive

City State Zip Code
Juno Beach FL 33408-2145

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai02707

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Miss Iliana Niciu

Mailing Address P.O. Box 92

City State Zip Code
Camden NY 13316-0092

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai02708

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Rachel K. Nicklaus

Mailing Address P.O. Box 393

City State Zip Code
Hammondsport NY 14840-0393

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai02709

Amount of Each Receipt this Period
110.00

SUBTOTAL of Receipts This Page (optional) ▶

460.00

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 910 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Rachel K. Nicklaus

Mailing Address P.O. Box 393

City State Zip Code
Hammondsport NY 14840-0393

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02710

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Ms. Marilyn D. Nielson

Mailing Address 7 Silverleaf Drive

City State Zip Code
Rolling Hills Esta CA 90274-2510

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02711

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Jack K. Nisselius

Mailing Address P.O. Box 3006

City State Zip Code
Gillette WY 82717-3006

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02712

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 911 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Harvey Nix

Mailing Address P.O. Box 74

City State Zip Code
Bat Cave NC 28710-0074

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 310.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02713

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Jon Nix

Mailing Address 3127 Keller Bend Road

City State Zip Code
Knoxville TN 37922-6524

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02714

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Camille Nixon

Mailing Address 2126 Edenton Road

City State Zip Code
Charlotte NC 28211-3852

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai02715

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶ 5600.00

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 912 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Russ P. Nockels

Mailing Address 1147 Ashland Ave.

City State Zip Code
River Forest IL 60305-1437

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Loyola University Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02716

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Felix Nodar

Mailing Address 326-328 Front Street

City State Zip Code
Staten Island NY 10304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02717

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Felix Nodar

Mailing Address 326-328 Front Street

City State Zip Code
Staten Island NY 10304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02718

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 913 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Xavier Noel

Mailing Address 396 Lydecker Street

City Englewood State NJ Zip Code 07631-1914

FEC ID number of contributing federal political committee. **C**

Name of Employer Paris Gourmet Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai02719

Amount of Each Receipt this Period 300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Frank T. Nolden

Mailing Address 303 Chimney Rock Street

City Lufkin State TX Zip Code 75904-7580

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai02720

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Donna M. Noll

Mailing Address 1905 Corta Bella Drive

City Las Vegas State NV Zip Code 89134-6145

FEC ID number of contributing federal political committee. **C**

Name of Employer Realty One Group Occupation Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 27 / 2009

Transaction ID: 2009M04L11ai02721

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ▶ **425.00**

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 914 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Claire S. Nordeck

Mailing Address 201 Saint Mark Way
Apartment 404

City State Zip Code
Westminister MD 21158-4195

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai02722

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Claire S. Nordeck

Mailing Address 201 Saint Mark Way
Apartment 404

City State Zip Code
Westminister MD 21158-4195

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02723

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Jatana H Norris

Mailing Address P.O. Box 930

City State Zip Code
North SC 29112-0930

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02724

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional) ► 300.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 915 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Jatana H Norris

Mailing Address P.O. Box 930

City State Zip Code
North SC 29112-0930

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 445.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02725

Amount of Each Receipt this Period
295.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert E. Northrip

Mailing Address 6439 Wenonga Road

City State Zip Code
Mission Hills KS 66208-1723

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02726

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Thomas & Margot R. Norton

Mailing Address 7158 Cavalry Drive

City State Zip Code
Warrenton VA 20187-9187

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02727

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional) ► 1020.00

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 916 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Steve & Pat Notestine

Mailing Address 1825 South Mason

City State Zip Code
St Louis MO 63131-1520

FEC ID number of contributing federal political committee. **C**

Name of Employer: Quadrant Properties Occupation: Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 10 / 2009
Transaction ID: 2009M04L11ai02728
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Dorothea M. Notter

Mailing Address 3386 W. Fairway Dr.

City State Zip Code
Coeur D. Alene ID 83815-8071

FEC ID number of contributing federal political committee. **C**

Name of Employer: Homemaker Occupation: Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai02729
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Dorothea M. Notter

Mailing Address 3386 W. Fairway Dr.

City State Zip Code
Coeur D. Alene ID 83815-8071

FEC ID number of contributing federal political committee. **C**

Name of Employer: Homemaker Occupation: Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai02730
Amount of Each Receipt this Period: 80.00

SUBTOTAL of Receipts This Page (optional) ► **1180.00**

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 917 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thomas E. Nowakowski, Sr.
Mailing Address 7 Chestnut Lane

City State Zip Code
New Hope PA 18938-9206

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United Marketing Services Sales Management
Inc.

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02731

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Thurlow R. Null
Mailing Address 13381 Longview Avenue

City State Zip Code
Waynesboro PA 17268-9403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02732

Amount of Each Receipt this Period
210.00

C. Full Name (Last, First, Middle Initial)
Mr. McKee Nunnally, Jr.
Mailing Address 3180 Arden Road N.W.

City State Zip Code
Atlanta GA 30305-1917

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02733

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **1410.00**

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 918 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Anthony P. Nuzzi

Mailing Address 56 Maryland Avenue

City State Zip Code
Pennsville NJ 08070-1528

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02734

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul A. Nuzzi, Jr.

Mailing Address 2158 Saint Clair Court

City State Zip Code
Girard OH 44420-1163

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02735

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Derek O' Brien

Mailing Address 12759 Biggin Church Rd. S.

City State Zip Code
Jacksonville FL 32224-7934

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02736

Amount of Each Receipt this Period
160.00

SUBTOTAL of Receipts This Page (optional) ► **410.00**

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 919 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Derek O' Brien

Mailing Address 12759 Biggin Church Rd. S.

City State Zip Code
Jacksonville FL 32224-7934

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 2009M04L11ai02737

Amount of Each Receipt this Period
160.00

B.

Full Name (Last, First, Middle Initial)
Mr. Derek O' Brien

Mailing Address 12759 Biggin Church Rd. S.

City State Zip Code
Jacksonville FL 32224-7934

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02738

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert J. O' Brien

Mailing Address 2381 Indigo Lane

City State Zip Code
Glenview IL 60026-7773

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 9 / 2 0 0 9

Transaction ID: 2009M04L11ai02739

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶ **760.00**

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 920 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms Dawn O' Connor

Mailing Address 440 Spring Forest Drive

City State Zip Code
New Smyrna Beach FL 32168-8704

FEC ID number of contributing federal political committee. **C**

Name of Employer Daytona Elevator Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai02740

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas H. O' Connor

Mailing Address 55 Pleasant Street

City State Zip Code
Canton MA 02021-2231

FEC ID number of contributing federal political committee. **C**

Name of Employer O' Connor Contractos Occupation Construction Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02741

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas M. O' Connor

Mailing Address P.O. Box 1878

City State Zip Code
Victoria TX 77902-1878

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02742

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

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 921 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. John M. O' Day

Mailing Address 41 River Road

City Rollinsford State NH Zip Code 03869-5804

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai02743
Amount of Each Receipt this Period 240.00

B. Full Name (Last, First, Middle Initial)
Mr. John P. O' Hara, Sr.

Mailing Address 319 Reade Dr.

City Roxboro State NC Zip Code 27573-5138

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai02744
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Edward J. O' Hare

Mailing Address 22500 Orchard Lake Road Suite 113

City Farmington State MI Zip Code 48336-3242

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai02745
Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► 840.00

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 922 / 1945
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Edward J. O' Hare	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 22500 Orchard Lake Road Suite 113	Transaction ID: 2009M04L11ai02746
	City Farmington State MI Zip Code 48336-3242	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Mr. Michael P. O' Mara	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 4928 South Ellis Avenue	Transaction ID: 2009M04L11ai02747
	City Chicago State IL Zip Code 60615-2708	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Andrew P. O' Meara, Jr.	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 259 Fairway Lane	Transaction ID: 2009M04L11ai02748
	City Pawleys Island State SC Zip Code 29585-5611	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

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 923 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Andrew P. O' Meara, Jr.

Mailing Address 259 Fairway Lane

City Pawleys Island State SC Zip Code 29585-5611

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 19 / 2009

Transaction ID: 2009M04L11ai02749

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Patrick O' Reilly

Mailing Address 55 Street Of Dreams

City Village Of Loch LI State MO Zip Code 64012-4178

FEC ID number of contributing federal political committee. **C**

Name of Employer Four Leaf Properties, Llc Occupation Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt 03 / 16 / 2009

Transaction ID: 2009M04L11ai02750

Amount of Each Receipt this Period 205.00

C. Full Name (Last, First, Middle Initial)
Mr. Patrick O' Reilly

Mailing Address 55 Street Of Dreams

City Village Of Loch LI State MO Zip Code 64012-4178

FEC ID number of contributing federal political committee. **C**

Name of Employer Four Leaf Properties, Llc Occupation Developer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt 03 / 26 / 2009

Transaction ID: 2009M04L11ai02751

Amount of Each Receipt this Period 205.00

SUBTOTAL of Receipts This Page (optional) ▶ **460.00**

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 924 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Edward O'Connor		Date of Receipt																					
	Mailing Address 4344 Helene Dr.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	0		2	0	0	9														
	City State Zip Code Charleston SC 29418-5723		Transaction ID: 2009M04L11ai02752																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Requested Aggregate Year-to-Date ▼ 225.00																						

B.	Full Name (Last, First, Middle Initial) Mr. Gerald P. O'Driscoll, Jr.		Date of Receipt																					
	Mailing Address 10280 Copper Cloud Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	3		2	0	0	9														
	City State Zip Code Reno NV 89511-5349		Transaction ID: 2009M04L11ai02753																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Requested Aggregate Year-to-Date ▼ 250.00																						

C.	Full Name (Last, First, Middle Initial) Mr. Larry J O'Flaherty		Date of Receipt																					
	Mailing Address 742 South 7th St		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	6		2	0	0	9														
	City State Zip Code Upper Sandusky OH 43351-1604		Transaction ID: 2009M04L11ai02754																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation Requested Aggregate Year-to-Date ▼ 400.00																						

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 925 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Robert O'Shaughnessy

Mailing Address 6N751 Foxborough Rd

City State Zip Code
St. Charles IL 60175-6325

FEC ID number of contributing federal political committee. **C**

Name of Employer Eds Occupation Business Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02755

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Jim Oden

Mailing Address 17017 E. 48Th Street

City State Zip Code
Tulsa OK 74134-7242

FEC ID number of contributing federal political committee. **C**

Name of Employer Staff Metric, Inc. Occupation Sales/Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02756

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Ray P. Oden, Jr.

Mailing Address 702 Thora Blvd.

City State Zip Code
Shreveport LA 71106-1824

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai02757

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 926 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Freida L. Odum

Mailing Address 1 Myrtlewood Drive

City State Zip Code
Savannah GA 31405-1084

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02758

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Odessa L. Ofstad

Mailing Address 872 College Park Place

City State Zip Code
Kirksville MO 63501-1869

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02759

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Roger W. Ogden

Mailing Address 8532 Shingle Oaks Drive

City State Zip Code
Cordova TN 38018-6486

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Southern Systems, Inc. Field Manager

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai02760

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

700.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 927 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Victor Ohman

Mailing Address P.O. Box 897

City State Zip Code
Glenrock WY 82637-0897

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai02761

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Miss Julia Olah

Mailing Address 110 44Th Street

City State Zip Code
Sandusky OH 44870-4856

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 9

Transaction ID: 2009M04L11ai02762

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Ms. Jennifer R. Olbum

Mailing Address 1211 Squirrel Hill Avenue

City State Zip Code
Pittsburgh PA 15217-1147

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Daniel Nadler Physician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02763

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **550.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 928 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard C. Oldack

Mailing Address 37 Windsor Drive

City State Zip Code
Bridgeport WV 26330-2807

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02764

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Ms. Martha C. Oliphant

Mailing Address 4977 Glenbrook Road N.W.

City State Zip Code
Washington DC 20016-3222

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02765

Amount of Each Receipt this Period
105.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles P. Oliver

Mailing Address 11648 Edinburgh Way

City State Zip Code
Jacksonville FL 32223-1310

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02766

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **230.00**

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 929 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Charles P. Oliver

Mailing Address 11648 Edinburgh Way

City State Zip Code
Jacksonville FL 32223-1310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	9

Transaction ID: 2009M04L11ai02767

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. Kjell L. Oliversen

Mailing Address 29709 Cojak Circle

City State Zip Code
Boerne TX 78015-4521

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai02768

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Shirley J. Olon

Mailing Address 132 Westover Dr.

City State Zip Code
Bristol TN 37620-2948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	0	/	2	0	0	9

Transaction ID: 2009M04L11ai02769

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ►

725.00

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 930 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Shirley J. Olson

Mailing Address 132 Westover Dr.

City State Zip Code
Bristol TN 37620-2948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai02770

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Jeanne M. Olsen

Mailing Address 1115 Marshall Avenue

City State Zip Code
Richland WA 99354-3352

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Fluor Hanford Stationary Operating Eng.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 315.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai02771

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)
Mr. Kelly Olsen

Mailing Address 313 Stone Gate Ln.

City State Zip Code
Provo UT 84604-6223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Morinda Inc. Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai02772

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

475.00

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 931 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Richard Olsen

Mailing Address 36W720 Wild Rose Rd

City State Zip Code
St Charles IL 60174-1140

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02773

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. George W. Olson

Mailing Address 5206 W. 80th Terrace

City State Zip Code
Prairie Village KS 66208-4913

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02774

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Andrew Orlando

Mailing Address 6601 Dearborn Drive

City State Zip Code
Falls Church VA 22044-1122

FEC ID number of contributing federal political committee. **C**

Name of Employer Visa U.S.A., Inc. Occupation Financial Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai02775

Amount of Each Receipt this Period
115.00

SUBTOTAL of Receipts This Page (optional) ► 515.00

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 932 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Andrew Orlando

Mailing Address 6601 Dearborn Drive

City State Zip Code
Falls Church VA 22044-1122

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Visa U.S.A., Inc. Financial Analyst

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
460.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai02776

Amount of Each Receipt this Period
115.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Dale L. Orlowski

Mailing Address 5913 Skinner Point Blvd. S.

City State Zip Code
Gulfport FL 33707-3937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02777

Amount of Each Receipt this Period
750.00

C.

Full Name (Last, First, Middle Initial)
Dr. Yefim Ornstein

Mailing Address 2072 Ocean Avenue
Suite 102

City State Zip Code
Brooklyn NY 11230-7380

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02778

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

965.00

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 933 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Yefim Ornstein

Mailing Address 2072 Ocean Avenue
Suite 102

City State Zip Code
Brooklyn NY 11230-7380

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai02779

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Dr. Yefim Ornstein

Mailing Address 2072 Ocean Avenue
Suite 102

City State Zip Code
Brooklyn NY 11230-7380

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai02780

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Ms. Zandra J. Orr

Mailing Address 6 Red Sky Ln.

City State Zip Code
Roswell NM 88201-8315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N.M. Subway, Inc. Restaurant Owner

Receipt For: Primary General
 Other (specify) ▼ Aggregate Year-to-Date ▼
550.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02781

Amount of Each Receipt this Period

250.00

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 934 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Beth Orscheln

Mailing Address 4016 Glen Eagle Drive

City State Zip Code
Columbia MO 65203-4801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai02782

Amount of Each Receipt this Period
2500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael J. Osgood

Mailing Address 965 Sheldon Avenue

City State Zip Code
Staten Island NY 10309-2229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
New York Police Department Police Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02783

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael J. Osgood

Mailing Address 965 Sheldon Avenue

City State Zip Code
Staten Island NY 10309-2229

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
New York Police Department Police Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai02784

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

2750.00

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 935 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Judith Otten

Mailing Address 122 El Camino

City Norfolk State NE Zip Code 68701-6704

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 24 / 2009

Transaction ID: 2009M04L11ai02785

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Jack Oujo

Mailing Address 1540 Highway 138 Suite 106

City Wall State NJ Zip Code 07719-3766

FEC ID number of contributing federal political committee. **C**

Name of Employer Jack Oujo Cpa, Inc Occupation Financial Planner/Cpa

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai02786

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Virginia Overcash

Mailing Address 2628 Freedom Heights

City Colorado Springs State CO Zip Code 80904-5108

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai02787

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 800.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 936 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Virginia Overcash
Mailing Address 2628 Freedom Heights
City State Zip Code
Colorado Springs CO 80904-5108
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9
Transaction ID: 2009M04L11ai02788
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Russell Marvin Owens
Mailing Address 609 S. Greenwood Avenue
City State Zip Code
Columbia MO 65203-2768
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 9
Transaction ID: 2009M04L11ai02789
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Malcolm W. Owings
Mailing Address 107 Caritas Court
City State Zip Code
Southern Pines NC 28387-2242
FEC ID number of contributing federal political committee. **C**
Name of Employer Ret. Occupation Precinct Chairman
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 9
Transaction ID: 2009M04L11ai02790
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 650.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 937 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Jeanne H. Ozment

Mailing Address 9142 Willow Walk

City State Zip Code
Bonita Springs FL 34135-8140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02791

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Tony Pack

Mailing Address 6618 N.E. Loop 820

City State Zip Code
Richland Hills TX 76180-7844

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Five Star Ford Dealer/Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai02792

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Betty A. Pacocha

Mailing Address P.O. Box 596

City State Zip Code
Kent CT 06757-0596

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02793

Amount of Each Receipt this Period
130.00

SUBTOTAL of Receipts This Page (optional) ► **730.00**

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 938 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Valerie N. Page

Mailing Address 403 W. Masonic View Avenue

City State Zip Code
Alexandria VA 22301-2420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Page Kids Mom

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai02794

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Bruce Paget

Mailing Address 3801 Faircircle

City State Zip Code
Midland TX 79707-4311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02795

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Dr. Donna Palacios

Mailing Address 1623 Garland Drive

City State Zip Code
Goshen IN 46526-5604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai02796

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 939 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Kenneth Palestrant

Mailing Address 804 S.E. Portage Avenue

City State Zip Code
Port Saint Lucie FL 34984-5246

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 18 / 2009

Transaction ID: 2009M04L11ai02797

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Gerald Palm

Mailing Address P.O. Box 60

City State Zip Code
Elk Mountain WY 82324-0060

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 16 / 2009

Transaction ID: 2009M04L11ai02798

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Caroline Ann Palmer

Mailing Address 3542 Northpointe Drive

City State Zip Code
Las Cruces NM 88012-8515

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 05 / 2009

Transaction ID: 2009M04L11ai02799

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 940 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Morton Palmer

Mailing Address 1401 North Street

City State Zip Code
Beaufort SC 29902-4909

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A N/A

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02800

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr Walt Palmieri

Mailing Address 6764 Schuyler Rd

City State Zip Code
E Syracuse NY 13057

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
First Tennessee Ftn Financial Fixed Income Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai03947

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mr. Erving Henry Pangborn

Mailing Address 2018 Herbert Lane

City State Zip Code
Augusta GA 30906-3656

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 900.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02801

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

800.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 941 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Gene Pantuso		Date of Receipt
	Mailing Address 45605 Citrus Avenue		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Indio	CA	92201-3451
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02802
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1500.00"/>
		<input type="text" value="1500.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. Robert H. Paolucci		Date of Receipt
	Mailing Address 38 Tower Place		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fort Thomas	KY	41075-2135
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02803
Name of Employer Ebcx Inc.		Occupation Real Estate Mgmt	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="200.00"/>
		<input type="text" value="300.00"/>	

C.	Full Name (Last, First, Middle Initial) Mrs. Lois Pardee		Date of Receipt
	Mailing Address 1139 E. Carleton Avenue		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Orange	CA	92867-3867
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai02804
Name of Employer State Of California City Of Orange		Occupation Court Reporter	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="75.00"/>
		<input type="text" value="295.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1775.00"/>
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 942 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Jacques Pare

Mailing Address 10150 Greensward Link

City State Zip Code
ljamsville MD 21754-9636

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rental Investments Proper- Property Management
ties

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai02805

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Ms. Raquel C. Paredes

Mailing Address P.O. Box 428

City State Zip Code
Poughquag NY 12570-0428

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai02806

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bruce & Clare Parker

Mailing Address 20008 Hunt Pass Court

City State Zip Code
Parkton MD 21120-9094

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Venable, L.L.P. Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai02807

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1020.00

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 943 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Irene M. Parker

Mailing Address 209 E. 25Th Street

City State Zip Code
Marysville CA 95901-3253

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02808

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Joe J. Parker

Mailing Address 78 Wall Street

City State Zip Code
Pisgah Forest NC 28768-8915

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02809

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Bill Parks

Mailing Address 51 Olmstead Road

City State Zip Code
Weston WY 82731-8820

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai02810

Amount of Each Receipt this Period
305.00

SUBTOTAL of Receipts This Page (optional) ► 905.00

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 944 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James L. Parks

Mailing Address 646 E. Oak Place

City Edmond State OK Zip Code 73025-2712

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai02811
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Larry Parks

Mailing Address P.O. Box 483

City Buna State TX Zip Code 77612-0483

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai02812
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Tito L. Parola

Mailing Address 806 N. Batavia St.

City Orange State CA Zip Code 92868-1242

FEC ID number of contributing federal political committee. **C**

Name of Employer Associated Laboratories Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai02813
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 945 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. William Parrish

Mailing Address P.O. Box 1128
1401 N. Arendell Avenue

City Zebulon State NC Zip Code 27597-1128

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2009

Transaction ID: 2009M04L11ai02814

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Joe Parsley

Mailing Address 10 Waterford Oaks Ln.

City Kemah State TX Zip Code 77565-2922

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai02815

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Ms. Rosanne Paschal

Mailing Address 957 Eddystone Circle

City Naperville State IL Zip Code 60565-6113

FEC ID number of contributing federal political committee. **C**

Name of Employer College Of Dupage Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02816

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 946 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Betty Rae Pastoor
Mailing Address 3062 E. 3200 N.
City State Zip Code
Twin Falls ID 83301-0518
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00
Date of Receipt M M / D D / Y Y Y Y Y
03 / 05 / 2009
Transaction ID: 2009M04L11ai02817
Amount of Each Receipt this Period 210.00

B. Full Name (Last, First, Middle Initial)
Mr. James R. Paterson
Mailing Address 2415 Keyberry Lane
City State Zip Code
Bowie MD 20715-2849
FEC ID number of contributing federal political committee. **C**
Name of Employer Ngia Occupation Nautical Analyst
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt M M / D D / Y Y Y Y Y
03 / 06 / 2009
Transaction ID: 2009M04L11ai02818
Amount of Each Receipt this Period 75.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph Patrick
Mailing Address 90 Navarre
City State Zip Code
Irvine CA 92612-1721
FEC ID number of contributing federal political committee. **C**
Name of Employer Fluor Corporation Occupation Accountant
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 303.00
Date of Receipt M M / D D / Y Y Y Y Y
03 / 23 / 2009
Transaction ID: 2009M04L11ai02819
Amount of Each Receipt this Period 115.00

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 947 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Steward Patrick

Mailing Address 1315 Hagys Ford Road

City State Zip Code
Penn Valley PA 19072-1104

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02820

Amount of Each Receipt this Period
330.00

B. Full Name (Last, First, Middle Initial)
Mr. David Patten

Mailing Address 315 Lansdowne Rd.

City State Zip Code
Havertown PA 19083-5305

FEC ID number of contributing federal political committee. **C**

Name of Employer Everchem Llc Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02821

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Kathleen Patterson

Mailing Address 1450 Sylvaner Avenue

City State Zip Code
Saint Helena CA 94574-2338

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02822

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1080.00**

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 948 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth Paul

Mailing Address 6417 S.E. Congressional Lane

City State Zip Code
Stuart FL 34997-8609

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02823

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Gary L. Paulson

Mailing Address 13519 Cahill Lane

City State Zip Code
Cypress TX 77429-5149

FEC ID number of contributing federal political committee. **C**

Name of Employer B.P. America Inc. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai02824

Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Vernon O. Paulson

Mailing Address 51 Ivy Hill Road

City State Zip Code
Red Bank NJ 07701-5121

FEC ID number of contributing federal political committee. **C**

Name of Employer A.X.A./Equitable Occupation Financial Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai02825

Amount of Each Receipt this Period: 220.00

SUBTOTAL of Receipts This Page (optional) ► **770.00**

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 949 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Mildred Pavlic

Mailing Address 606 Troy Drive

City Steubenville State OH Zip Code 43953-3332

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai02826

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Ms. Mildred Pavlic

Mailing Address 606 Troy Drive

City Steubenville State OH Zip Code 43953-3332

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02827

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Ms. Mildred Pavlic

Mailing Address 606 Troy Drive

City Steubenville State OH Zip Code 43953-3332

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02828

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **90.00**

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 950 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Don S. Payne, USA (Ret)

Mailing Address 12525 N. Pennsylvania Avenue
Apartment 119

City Oklahoma City State OK Zip Code 73120-9449

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai02829
Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Don S. Payne, USA (Ret)

Mailing Address 12525 N. Pennsylvania Avenue
Apartment 119

City Oklahoma City State OK Zip Code 73120-9449

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 25 / 2009
Transaction ID: 2009M04L11ai02830
Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Nyla R. Payne

Mailing Address 7250 Poplar Street
Apartment 124

City Boise State ID Zip Code 83704-7366

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2009
Transaction ID: 2009M04L11ai02831
Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) ► 135.00

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 951 / 1945
	(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Will Peacock		Date of Receipt
	Mailing Address 2727 Paces Ferry Rd Suite 2-450		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Atlanta	GA	30339-4007
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02832
Name of Employer lic,llc		Occupation Actuary	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

B.	Full Name (Last, First, Middle Initial) Mr. Preston A. Peak		Date of Receipt
	Mailing Address 3500 Princeton Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 03 / 2009
	City	State	Zip Code
	Dallas	TX	75205-3247
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02833
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) Mr. F. G. Pearce		Date of Receipt
	Mailing Address 44732 Garden Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 11 / 2009
	City	State	Zip Code
	Davis	CA	95618-1002
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02834
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1050.00
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 952 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard J. Pearce

Mailing Address 9870 Breezy Point Lane

City Hayes State VA Zip Code 23072-4019

FEC ID number of contributing federal political committee. **C**

Name of Employer Riverside Health System Occupation Health Care Administrator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02835
 Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Ms. Rosemarie S. Pease

Mailing Address 1482 Ridgewood Road

City Pleasanton State CA Zip Code 94566-6056

FEC ID number of contributing federal political committee. **C**

Name of Employer Whmayeracctg Occupation Tax Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai02836
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Rosemarie S. Pease

Mailing Address 1482 Ridgewood Road

City Pleasanton State CA Zip Code 94566-6056

FEC ID number of contributing federal political committee. **C**

Name of Employer Whmayeracctg Occupation Tax Accountant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02837
 Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► **650.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 953 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Ms. Mary Ann Peck

Mailing Address P.O. Box 78

City

State

Zip Code

Quartzsite

AZ

85346-0078

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai02838

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Mr. Russell Maurice Peck

Mailing Address 5015 Westerdale Drive

City

State

Zip Code

Fulshear

TX

77441-4216

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai02839

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Ms. Mara Peck-Colin

Mailing Address 20215 County Road 94A

City

State

Zip Code

Woodland

CA

95695-9363

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai02840

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 954 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Alan G. Pedersen

Mailing Address P.O. Box 1853

City State Zip Code
Los Altos CA 94023-1853

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 03 / 2009**

Transaction ID: 2009M04L11ai02841

Amount of Each Receipt this Period **500.00**

B. Full Name (Last, First, Middle Initial)
Ms. Parrell Pedersen

Mailing Address 409 Pine Street

City State Zip Code
Klamath Falls OR 97601-6020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Pedersen & Pedersen Architects Architect

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 06 / 2009**

Transaction ID: 2009M04L11ai02842

Amount of Each Receipt this Period **300.00**

C. Full Name (Last, First, Middle Initial)
Steven D. Pedro, M.D.

Mailing Address 7833 Oakmont Blvd.

City State Zip Code
Fort Worth TX 76132-4231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 17 / 2009**

Transaction ID: 2009M04L11ai02843

Amount of Each Receipt this Period **300.00**

SUBTOTAL of Receipts This Page (optional) **1100.00**

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 955 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stuart A. Peebles

Mailing Address P.O. Box 752

City State Zip Code
Rome GA 30162-0752

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02844

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Stuart A. Peebles

Mailing Address P.O. Box 752

City State Zip Code
Rome GA 30162-0752

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02845

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. John B. Pelligrino

Mailing Address 5437 Cherry Street Extension

City State Zip Code
Erie PA 16509-3107

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02846

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 956 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John B. Pelligrino

Mailing Address 5437 Cherry Street Extension

City Erie State PA Zip Code 16509-3107

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai02847
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. William Peluchowski

Mailing Address 1438 S. Prairie Avenue

City Chicago State IL Zip Code 60605-2884

FEC ID number of contributing federal political committee. **C**

Name of Employer Houlinan, Loker, Howard & Zulkun Occupation Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai02848
Amount of Each Receipt this Period 220.00

C. Full Name (Last, First, Middle Initial)
Mr. David A. Pendery

Mailing Address 326 N. Grand Avenue

City Waxahachie State TX Zip Code 75165-2220

FEC ID number of contributing federal political committee. **C**

Name of Employer Magnablend, Inc. Occupation Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai02849
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 920.00

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 957 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Michel Pendill

Mailing Address 440 E. 57Th Street
Apartment 8A

City State Zip Code
New York NY 10022-3050

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02850

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Mrs. Francis Noreen Pendley

Mailing Address 6000 San Jose Blvd.

City State Zip Code
Jacksonville FL 32217-2347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02851

Amount of Each Receipt this Period
450.00

C. Full Name (Last, First, Middle Initial)
Mrs. Francis Noreen Pendley

Mailing Address 6000 San Jose Blvd.

City State Zip Code
Jacksonville FL 32217-2347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
900.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02852

Amount of Each Receipt this Period
450.00

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 958 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Glenn E. Penisten

Mailing Address 11651 Brooks Road

City Windsor State CA Zip Code 95492-9433

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai02853
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
D. V. Penland

Mailing Address 2722 Larsen Road

City Jacksonville State FL Zip Code 32207-7220

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai02854
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Melanie A. Penna

Mailing Address 560 Meadow Lark Lane

City Hockessin State DE Zip Code 19707-9640

FEC ID number of contributing federal political committee. **C**

Name of Employer Comcast Cable Communications Occupation Vice President Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02855
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 959 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Fernando J. Perez

Mailing Address 14 Hibernia Road

City Savannah State GA Zip Code 31411-1439

FEC ID number of contributing federal political committee. **C**

Name of Employer G.A. Energy Association Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai02856

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert S. Perkin

Mailing Address 160 Brookside Road

City Darien State CT Zip Code 06820-2804

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai02857

Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Mr. Samuel Perkins

Mailing Address 2836 Chesapeake Street Nw

City Washington State DC Zip Code 20008-1044

FEC ID number of contributing federal political committee. **C**

Name of Employer Steptoe & Johnson LLP Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai02858

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 525.00

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 960 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Marie Therese Pero

Mailing Address 3037 122Nd Place N.E.

City State Zip Code
Bellevue WA 98005-1522

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02859

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph A. Perricone

Mailing Address 18 Old Course Drive

City State Zip Code
Newport Beach CA 92660-4276

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Perricone Investments C.F.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1740.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02860

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Henry A. Perry

Mailing Address 210 Summit Avenue

City State Zip Code
Brookline MA 02446-2357

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02861

Amount of Each Receipt this Period
750.00

SUBTOTAL of Receipts This Page (optional) ► 1375.00

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 961 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Paul K. Perry

Mailing Address 3401 N. Wilder Rd.

City State Zip Code
Plant City FL 33565-2677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tampabay Emergency Physicians Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02862

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Nicholas Perusina

Mailing Address 1700 SW 14 Street

City State Zip Code
Miami FL 33145-1406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ret. None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 845.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02863

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
Mr. Nicholas Perusina

Mailing Address 1700 SW 14 Street

City State Zip Code
Miami FL 33145-1406

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ret. None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 845.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02864

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **310.00**

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 962 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Nicholas Perusina

Mailing Address 1700 SW 14 Street

City Miami State FL Zip Code 33145-1406

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai02865
Amount of Each Receipt this Period: 10.00

B. Full Name (Last, First, Middle Initial)
Mr. Nicholas Perusina

Mailing Address 1700 SW 14 Street

City Miami State FL Zip Code 33145-1406

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 845.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai02866
Amount of Each Receipt this Period: 25.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Roland O. Peteler

Mailing Address 1467 Grenoside Avenue

City Schenectady State NY Zip Code 12308-1503

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai02867
Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► 85.00

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 963 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Dr. Rodney C. Petersen

Mailing Address 1350 S. 1000 E.

City State Zip Code
Mapleton UT 84664-5023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Utah Valley Radiology Associates Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 930.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai02868

Amount of Each Receipt this Period
930.00

B.

Full Name (Last, First, Middle Initial)

Mr. T. K. Petersen

Mailing Address 1050 Franklin Street

City State Zip Code
Santa Monica CA 90403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai02869

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)

Mr. C. De Witt Peterson

Mailing Address 310 Pleasant Valley Avenue

City State Zip Code
Moorestown NJ 08057-2610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired
Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 325.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai02870

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

1430.00

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 964 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Dan Peterson

Mailing Address 40 Road 4C.P.

City Meeteetse State WY Zip Code 82433-0171

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai02871
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Daryl Peterson

Mailing Address 6115 W. Olmstead Road

City Ludington State MI Zip Code 49431-9754

FEC ID number of contributing federal political committee. **C**

Name of Employer Bushel Basket Orchards Inc. Occupation Fruit Grower and Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai02872
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mr. Kevin Peterson

Mailing Address 2810 Chariot Lane

City Garland State TX Zip Code 75044-5546

FEC ID number of contributing federal political committee. **C**

Name of Employer Raytheon Occupation Software Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 03 / 2009
Transaction ID: 2009M04L11ai02873
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 965 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thomas A. Peterson

Mailing Address 560 Park Drive

City State Zip Code
Shady Cove OR 97539-9751

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02874

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Ms. Valera L. Peterson

Mailing Address 3129 Lochridge Lane

City State Zip Code
Springfield IL 62704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai02875

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Julie A. Petracca

Mailing Address 342 Orange Street
Apartment 10

City State Zip Code
Newark NJ 07103-2851

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02876

Amount of Each Receipt this Period
65.00

SUBTOTAL of Receipts This Page (optional) ► **865.00**

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 966 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Francis Petro

Mailing Address P.O. Box 15549

City State Zip Code
Syracuse NY 13215-0549

FEC ID number of contributing federal political committee. **C**

Name of Employer Haynes International, Inc. Occupation President / C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02877

Amount of Each Receipt this Period
330.00

B. Full Name (Last, First, Middle Initial)
Mr. John Petrou

Mailing Address 82 Marmion Way

City State Zip Code
Rockport MA 01966-1926

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02878

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Steven Petrucelli

Mailing Address 167 Ridge Road

City State Zip Code
Watchung NJ 07069-5428

FEC ID number of contributing federal political committee. **C**

Name of Employer Daiichi-Sankyo, Inc. Occupation Marketing Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai02879

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 1380.00

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 967 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Catherine M. Pettengill		Date of Receipt
	Mailing Address 110 Eileen Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2009
	City	State	Zip Code
	Cedar Grove	NJ	07009-1352
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02880
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) Mr. Todd C. Pettengill		Date of Receipt
	Mailing Address 110 Eileen Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 24 / 2009
	City	State	Zip Code
	Cedar Grove	NJ	07009-1352
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02881
Name of Employer Citadel Broadcasting		Occupation Radio Host	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00

C.	Full Name (Last, First, Middle Initial) Mr. David A. Pettit		Date of Receipt
	Mailing Address 379 Fynn Valley Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	Las Vegas	NV	89148-4454
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02882
Name of Employer Southwest Surveillance Systems		Occupation President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 110.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5610.00
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 968 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Scott Petty, Jr.		Date of Receipt																					
	Mailing Address 202 La Jara Blvd		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	2		2	0	0	9														
	City State Zip Code San Antonio TX 78209-4444		Transaction ID: 2009M04L11ai02883																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00																						
Name of Employer Occupation Homemaker Homemaker & Rancher		Aggregate Year-to-Date ▼ 250.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

B.	Full Name (Last, First, Middle Initial) Ms. Beverly Pevehouse		Date of Receipt																					
	Mailing Address 810 Canonero Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	9		2	0	0	9														
	City State Zip Code Midland TX 79705-1802		Transaction ID: 2009M04L11ai02884																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00																						
Name of Employer Occupation Self-Employed Self-Employed		Aggregate Year-to-Date ▼ 2250.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

C.	Full Name (Last, First, Middle Initial) Mrs. Jeannie Pfister		Date of Receipt																					
	Mailing Address 3987 Southwoods Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	7		2	0	0	9														
	City State Zip Code Howell MI 48843-9406		Transaction ID: 2009M04L11ai02885																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00																						
Name of Employer Occupation B B & J Associates Manufacturer's Rep		Aggregate Year-to-Date ▼ 250.00																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 969 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Rudolf A. Pfeleger, Sr.		Date of Receipt
	Mailing Address 206 Katie Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	Feasterville Trevo	PA	19053-7328
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02886
Name of Employer Iner Precision		Occupation Sales Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 100.00

B.	Full Name (Last, First, Middle Initial) Mr. Rudolf A. Pfeleger, Sr.		Date of Receipt
	Mailing Address 206 Katie Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Feasterville Trevo	PA	19053-7328
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02887
Name of Employer Iner Precision		Occupation Sales Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 50.00

C.	Full Name (Last, First, Middle Initial) Ms. Caroline L. Pham		Date of Receipt
	Mailing Address 3700 Laburman Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2009
	City	State	Zip Code
	Randallstown	MD	21133-1513
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai02888
Name of Employer National Vietnamese American Voters Le		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	<input type="text"/> 200.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 350.00
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 970 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Joyce Phelps

Mailing Address 1500 Hinman Avenue
Apartment 301

City Evanston State IL Zip Code 60201-4646

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02889
Amount of Each Receipt this Period 150.00

B. Full Name (Last, First, Middle Initial)
Mr. Fred Joe Philbin

Mailing Address 15060 Washington Drive

City Fontana State CA Zip Code 92335-6287

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02890
Amount of Each Receipt this Period 45.00

C. Full Name (Last, First, Middle Initial)
Mr. Fred Joe Philbin

Mailing Address 15060 Washington Drive

City Fontana State CA Zip Code 92335-6287

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai02891
Amount of Each Receipt this Period 45.00

SUBTOTAL of Receipts This Page (optional) ► 240.00

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 971 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Fred Joe Philbin

Mailing Address 15060 Washington Drive

City State Zip Code
Fontana CA 92335-6287

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02892

Amount of Each Receipt this Period
45.00

B. Full Name (Last, First, Middle Initial)
Mr. Glen A. Phillips

Mailing Address 235 Sweet Spring Road

City State Zip Code
Glenmoore PA 19343-2600

FEC ID number of contributing federal political committee. **C**

Name of Employer Phelps Brothers Electrical Contractor Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02893

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Colonel & Verne Phillips

Mailing Address 7313 Mesa Drive

City State Zip Code
Austin TX 78731-2105

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02894

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **1120.00**

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 972 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Donovan Phillips

Mailing Address 134 W. Shipyard Rd.

City State Zip Code
Mount Pleasant SC 29464-2678

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Mountain Creek Contractor- Contractor
s, Inc.

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai02895

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Richard Phillips

Mailing Address 1001 Harvey Street

City State Zip Code
Raleigh NC 27608-2331

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
None Consultant

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai02896

Amount of Each Receipt this Period
2000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Vance W. Phillips

Mailing Address 7501 E. Thompson Peak Parkway
Unit 426

City State Zip Code
Scottsdale AZ 85255-4544

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai02897

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

2550.00

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 973 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Rene E. Pidoux, M.D.
 Mailing Address 435 Arden Avenue
Suite 410
 City State Zip Code
Glendale CA 91203-4020
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt: MM / DD / YYYY 03 / 27 / 2009
Transaction ID: 2009M04L11ai02898
 Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Hanns A. Pielenz
 Mailing Address 740 Manatee Cove
 City State Zip Code
Vero Beach FL 32963-3728
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00
 Date of Receipt: MM / DD / YYYY 03 / 16 / 2009
Transaction ID: 2009M04L11ai02899
 Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Dave L. Pierce
 Mailing Address 58 Mc Gowan Road
 City State Zip Code
Ogdensburg NY 13669-4325
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00
 Date of Receipt: MM / DD / YYYY 03 / 23 / 2009
Transaction ID: 2009M04L11ai02900
 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 1225.00
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 974 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Dave L. Pierce

Mailing Address 58 Mc Gowan Road

City Ogdensburg State NY Zip Code 13669-4325

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai02901
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Martin Pierce

Mailing Address 2341 N. Suntuoso Court
Apartment 11

City Farmington State NM Zip Code 87401-2188

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai02902
Amount of Each Receipt this Period 1200.00

C. Full Name (Last, First, Middle Initial)
Mr. Ronald D. Pierce

Mailing Address 33751 Blessington Lane

City San Juan Capo State CA Zip Code 92675-4958

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai02903
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1800.00

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 975 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Joya Piland

Mailing Address 3086 Quail St.

City Grand Junction State CO Zip Code 81504

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Embroidery

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai02904
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Maria Piscocoy

Mailing Address P.O. Box 924167

City Houston State TX Zip Code 77292-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer Nutri Vitamin Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 03 / 04 / 2009
Transaction ID: 2009M04L11ai02905
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Maria Piscocoy

Mailing Address P.O. Box 924167

City Houston State TX Zip Code 77292-4167

FEC ID number of contributing federal political committee. **C**

Name of Employer Nutri Vitamin Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai02906
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 850.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 976 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Jeffery J. Pitman

Mailing Address 2741 W 91st St

City State Zip Code
Bloomington MN 55431-2110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ENTAMP CONTY MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02907

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Dr. William A. Pitt

Mailing Address 1349 Partridge Avenue

City State Zip Code
El Cajon CA 92020-1480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02908

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. James D Pittman

Mailing Address 8525 Douglas Ave Ste 40

City State Zip Code
Urbandale IA 50322-2925

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai02909

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 977 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John B. Place

Mailing Address 34 Pond Lane

City State Zip Code
Bryn Mawr PA 19010-1772

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	0	9

Transaction ID: 2009M04L11ai02910
 Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Oscar A. Plasencia, Jr.

Mailing Address 2603 S.W. 122Nd Avenue

City State Zip Code
Davie FL 33330-1329

FEC ID number of contributing federal political committee. **C**

Name of Employer Miami-Dade Police Department Occupation Police Detective

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: 2009M04L11ai02911
 Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Andreas M. Pleil

Mailing Address 2241 Vista La Nisa

City State Zip Code
Carlsbad CA 92009-8712

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	0	9

Transaction ID: 2009M04L11ai02912
 Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00

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 978 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Mr. John Ploth</p> <p>Mailing Address 722 Walnut Street Apartment 306</p> <p>City Kansas City State MO Zip Code 64106-1609</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: 2009M04L11ai02913</p> <p>Amount of Each Receipt this Period 50.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	6	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3	/	1	6	/	2	0	0	9												

<p>B. Full Name (Last, First, Middle Initial) Mr. Matthias Plum, Jr.</p> <p>Mailing Address 172 Beacon Street</p> <p>City Boston State MA Zip Code 02116-1401</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: 2009M04L11ai02914</p> <p>Amount of Each Receipt this Period 500.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3	/	2	6	/	2	0	0	9												

<p>C. Full Name (Last, First, Middle Initial) Ms. Elizabeth Plumleigh</p> <p>Mailing Address 2132 N. Victoria Drive</p> <p>City Santa Ana State CA Zip Code 92706-2516</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Transaction ID: 2009M04L11ai02915</p> <p>Amount of Each Receipt this Period 500.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	3	0	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3	/	3	0	/	2	0	0	9												

SUBTOTAL of Receipts This Page (optional)	1050.00
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 979 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frank C. Poague

Mailing Address 8363 Cedarcrest Dr. E.

City State Zip Code
Southaven MS 38671-3415

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02916

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Frank C. Poague

Mailing Address 8363 Cedarcrest Dr. E.

City State Zip Code
Southaven MS 38671-3415

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02917

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Miss Michal Elizabeth Poche

Mailing Address 200D Dublin Circle

City State Zip Code
Lafayette LA 70506-3865

FEC ID number of contributing federal political committee. **C**

Name of Employer Arthur C. Leblanc, Jr. Cpl & Associate Occupation Landman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02918

Amount of Each Receipt this Period
150.00

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 980 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Miss Michal Elizabeth Poche

Mailing Address 200D Dublin Circle

City State Zip Code
Lafayette LA 70506-3865

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Arthur C. Leblanc, Jr. Cpl & Associate Landman

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: 2009M04L11ai02919

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Ms Susan Poff

Mailing Address 7900 S. Stivers Road

City State Zip Code
Germantown OH 45327-7523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	9

Transaction ID: 2009M04L11ai02920

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Glen Jeffrey Poffenbarger

Mailing Address 11901 Sawhill Blvd.

City State Zip Code
Spotsylvania VA 22553-3647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Medicorp Neurosurgeon

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	0	9

Transaction ID: 2009M04L11ai02921

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **875.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 981 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Ava Polansky-Bak

Mailing Address 330 Dogwood Lane

City State Zip Code
Manhasset NY 11030-2562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Adamba Imports Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai02922

Amount of Each Receipt this Period
40.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Ava Polansky-Bak

Mailing Address 330 Dogwood Lane

City State Zip Code
Manhasset NY 11030-2562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Adamba Imports Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02923

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Ava Polansky-Bak

Mailing Address 330 Dogwood Lane

City State Zip Code
Manhasset NY 11030-2562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Adamba Imports Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai02924

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **80.00**

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 982 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Ava Polansky-Bak

Mailing Address 330 Dogwood Lane

City State Zip Code
Manhasset NY 11030-2562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Adamba Imports Secretary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 480.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	9

Transaction ID: 2009M04L11ai02925

Amount of Each Receipt this Period

90.00

B.

Full Name (Last, First, Middle Initial)
Mr. Louis J. Poletti

Mailing Address 333 El Camino Real

City State Zip Code
South San Francisc CA 94080-5923

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	0	9

Transaction ID: 2009M04L11ai02926

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Alton Polk

Mailing Address 3613 Blain Drive

City State Zip Code
Rowlett TX 75088-6069

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	9

Transaction ID: 2009M04L11ai02927

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional) ▶

1200.00

TOTAL This Period (last page this line number only) ▶

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**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 983 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Anthony J. Ponsiglione, II

Mailing Address 1030 Manakin Road

City State Zip Code
Manakin Sabot VA 23103-3142

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
A.M.F. Worldwide Vice President Of Human Resources

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02928

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. David R. Poole

Mailing Address 8245 Thimble Court

City State Zip Code
San Diego CA 92129-3777

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai02929

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. James Pope

Mailing Address 207 Lakeview Circle

City State Zip Code
Montgomery TX 77356-5927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Self-Employed
Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai02930

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1550.00

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 984 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Jim Popp

Mailing Address 781 Pinecliff Pl.

City Columbus State OH Zip Code 43085-1906

FEC ID number of contributing federal political committee. **C**

Name of Employer Cardinal Orthopedic Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai02931

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Dan B. Porter

Mailing Address 5230 East Honeywood Lane

City Anaheim State CA Zip Code 92807-3602

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai02932

Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Mrs. Margaret Porter

Mailing Address 2207 Manhattan Blvd.

City Spirit Lake State IA Zip Code 51360-7542

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai02933

Amount of Each Receipt this Period 250.00

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 985 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert J. Porter

Mailing Address 1829 S.W. 146Th Street

City Burien State WA Zip Code 98166-1022

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai02934
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Val J. Porter

Mailing Address 1161 Mc Nutt Crossing

City Bogart State GA Zip Code 30622-2498

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai02935
Amount of Each Receipt this Period 300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Val J. Porter

Mailing Address 1161 Mc Nutt Crossing

City Bogart State GA Zip Code 30622-2498

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai02936
Amount of Each Receipt this Period 100.00

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 986 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Jeraldine L. Potras

Mailing Address 1055 E. Eckerman Avenue

City State Zip Code
West Covina CA 91790-1742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Compton Community College Consultant
Dist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai02937

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Jeraldine L. Potras

Mailing Address 1055 E. Eckerman Avenue

City State Zip Code
West Covina CA 91790-1742

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Compton Community College Consultant
Dist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02938

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mrs. Anne D. Potter

Mailing Address 15342 Round Island

City State Zip Code
Clayton NY 13624-2026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02939

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00

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 987 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. James C. Powell		Date of Receipt	
	Mailing Address 2409 Payne Street		M M / D D / Y Y Y Y Y 03 / 17 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai02940
	Evanston	IL	60201-2512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer New York Life Investment Management		Occupation Investment Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

B.	Full Name (Last, First, Middle Initial) Mr. Wellington Powell		Date of Receipt	
	Mailing Address 4230 N. 68Th Place		M M / D D / Y Y Y Y Y 03 / 12 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai02941
	Scottsdale	AZ	85251-2312	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Northern Trust Bank		Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Mr. William E. Powell		Date of Receipt	
	Mailing Address 2202 Patterson Place		M M / D D / Y Y Y Y Y 03 / 20 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai02942
	Arlington	TX	76012-5505	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		220.00	
Name of Employer Self-Employed		Occupation Self-Employed		
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)	▶	1470.00
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 988 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Carolyn C. Powers
Mailing Address 2012 The Strand
City State Zip Code
Manhattan Beach CA 90266-4559
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Homemaker Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1900.00
Date of Receipt
MM / DD / YYYY
03 / 13 / 2009
Transaction ID: 2009M04L11ai02943
Amount of Each Receipt this Period
1900.00

B. Full Name (Last, First, Middle Initial)
Mr. John Powers
Mailing Address 5310 E. Wonderview Road
City State Zip Code
Phoenix AZ 85018-1941
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Powers Steel & Wire Inc. Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt
MM / DD / YYYY
03 / 11 / 2009
Transaction ID: 2009M04L11ai02944
Amount of Each Receipt this Period
550.00

C. Full Name (Last, First, Middle Initial)
Mr. William Powers
Mailing Address 2012 The Strand
City State Zip Code
Manhattan Beach CA 90266-4559
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-employed Real Estate Broker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1900.00
Date of Receipt
MM / DD / YYYY
03 / 13 / 2009
Transaction ID: 2009M04L11ai02945
Amount of Each Receipt this Period
1900.00

SUBTOTAL of Receipts This Page (optional) ► 4350.00
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 989 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Dianna Broussard Prachyl

Mailing Address 232 Pin Oak Dr.

City State Zip Code
Mabank TX 75156-7160

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02946

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Roger A. Pratesi

Mailing Address 3545 Paces Ferry Cir. S. E.

City State Zip Code
Smyrna GA 30080-3129

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai02947

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. James D. Pratt

Mailing Address 18245 SE Village Circle

City State Zip Code
Tequesta FL 33469-3403

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02948

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 990 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Jane S. Pratt

Mailing Address 1479 SW Shoreline Dr.

City State Zip Code
Palm City FL 34990-4535

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02949

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
Mr. John T. Pratt

Mailing Address 1479 S.W. Shoreline Drive

City State Zip Code
Palm City FL 34990

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02950

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
Mr. Bernarr R. Pravel

Mailing Address 8580 Woodway Dr.
Apt. 1303

City State Zip Code
Houston TX 77063-2469

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02951

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **3500.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 991 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Cathy J. Prenner		Date of Receipt																					
	Mailing Address 2637 N.E. 28Th Court		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	6		2	0	9															
	City State Zip Code Lighthouse Point FL 33064-8219		Transaction ID: 2009M04L11ai02952																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Self-Employed Occupation: Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>300.00</td> </tr> </table>		300.00																				
300.00																								

B.	Full Name (Last, First, Middle Initial) Mrs. Mimi Prentice		Date of Receipt																					
	Mailing Address 435 E. 52nd Street Apartment 12G		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	5		2	0	9															
	City State Zip Code New York NY 10022-6445		Transaction ID: 2009M04L11ai02953																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>7500.00</td> </tr> </table>		7500.00																				
7500.00																								

C.	Full Name (Last, First, Middle Initial) Mr. Robert Prescott		Date of Receipt																					
	Mailing Address 6147 Menlo Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	7		2	0	9															
	City State Zip Code Baton Rouge LA 70808-5054		Transaction ID: 2009M04L11ai02954																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Co Op Bookstore, Inc. Occupation: President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>500.00</td> </tr> </table>		500.00																				
500.00																								

SUBTOTAL of Receipts This Page (optional)	3300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 992 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Harold W. Preston

Mailing Address 1613 Reunion Circle

City State Zip Code
Carrollton TX 75007-5026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W.E.B. Technology, Inc. Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02955

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. A. S. Price, Jr.

Mailing Address 1815 Enclave Parkway
Apartment 4301

City State Zip Code
Houston TX 77077-3666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02956

Amount of Each Receipt this Period
220.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Herbert H. Price

Mailing Address 17031 Bullfield Road

City State Zip Code
Doswell VA 23047-1902

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H. & L. Price, Inc. Highway Construction

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai02957

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **720.00**

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 993 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Will & Carolyn T. Price

Mailing Address 2634 Lowell Circle

City State Zip Code
Melbourne FL 32935-2217

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai02958

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Will & Carolyn T. Price

Mailing Address 2634 Lowell Circle

City State Zip Code
Melbourne FL 32935-2217

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02959

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Karin Prince

Mailing Address 300 Overlook Lane

City State Zip Code
Gulph Mills PA 19428-2634

FEC ID number of contributing federal political committee. **C**

Name of Employer The Prince Group Inc Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai02960

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 994 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Nazaro Propati

Mailing Address 1703 St. Andrew Drive

City State Zip Code
Vernon Hills IL 60061-1053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aon Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02961

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Nazaro Propati

Mailing Address 1703 St. Andrew Drive

City State Zip Code
Vernon Hills IL 60061-1053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aon Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai02962

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Ed Prosser

Mailing Address P.O. Box 14

City State Zip Code
Cheyenne WY 82003-0014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Rancher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02963

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 995 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Jane E. Protz

Mailing Address 115 Saltwater Way

City Savannah State GA Zip Code 31411-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02964
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Dr. William Pruchnic

Mailing Address 162 Lauren Lane

City Johnstown State PA Zip Code 15905

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai02965
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Gary Pruden

Mailing Address 15 Kellocks Run Road

City Hummelstown State PA Zip Code 17036-9182

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S.F. Glen Moore Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai02966
Amount of Each Receipt this Period 150.00

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 996 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Mickey Pruitt

Mailing Address R.R. 1 Box 16

City State Zip Code
Ratliff City OK 73481-9711

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai02967

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Mr. Ted A. Pruitt

Mailing Address 2617 Kenwood Drive

City State Zip Code
Duluth GA 30096-3637

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai02968

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Stephen & Katherine Pryor

Mailing Address 4 Lazy Wood Lane

City State Zip Code
Houston TX 77024-7541

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai02969

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 4800.00

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 997 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert J. Pugh

Mailing Address 4 Westwood Forest Lane

City State Zip Code
Kirkwood MO 63122-6556

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	0	9

Transaction ID: 2009M04L11ai02970

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert J. Pugh

Mailing Address 4 Westwood Forest Lane

City State Zip Code
Kirkwood MO 63122-6556

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	9

Transaction ID: 2009M04L11ai02971

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael Pulick

Mailing Address 1745 Stonebridge Drive S.

City State Zip Code
Ann Arbor MI 48108-8511

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: 2009M04L11ai02972

Amount of Each Receipt this Period
300.00

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 998 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Edward Allen Pundt

Mailing Address 1748 U. Ave

City State Zip Code
Homestead IA 52236-8532

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai02973

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)

Ms. Nancy Z. Punola

Mailing Address 210 Central Avenue

City State Zip Code
Madison NJ 07940-1611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai02974

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)

Ms. Linda L. Purcell

Mailing Address 920 N. Locust Lane

City State Zip Code
Tacoma WA 98406-1092

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai02975

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

400.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 999 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Barbara L. Purdon
Mailing Address P.O. Box 2307
City Oxford State MS Zip Code 38655-6000
FEC ID number of contributing federal political committee. **C**
Name of Employer Cardiology Consultants Of Oxford Occupation Nurse
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai02976
Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Lynn Purdy
Mailing Address P.O. Box 1995
City Upland State CA Zip Code 91785-1995
FEC ID number of contributing federal political committee. **C**
Name of Employer T.R.L. Systems Occupation Sales Executive
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 205.00
Date of Receipt 03 / 19 / 2009
Transaction ID: 2009M04L11ai02977
Amount of Each Receipt this Period 80.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. James L. Putnam
Mailing Address 203 Ash Avenue
City Tintah State MN Zip Code 56583-8321
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai02978
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 1180.00
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 1000 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. James L. Putnam

Mailing Address 203 Ash Avenue

City State Zip Code
Tintah MN 56583-8321

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	9

Transaction ID: 2009M04L11ai02979

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Freddie Pyron

Mailing Address 535 Futral Road

City State Zip Code
Griffin GA 30224-7516

FEC ID number of contributing federal political committee. **C**

Name of Employer TWA Occupation Ramp Servicer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	9

Transaction ID: 2009M04L11ai02980

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Burl V. Quimby

Mailing Address P.O. Box 351

City State Zip Code
Chaton AL 36518-0351

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	0	9

Transaction ID: 2009M04L11ai02981

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 1001 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Burl V. Quimby

Mailing Address P.O. Box 351

City State Zip Code
Chaton AL 36518-0351

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai02982

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)

Lee & David Quincy

Mailing Address P.O. Box 337

City State Zip Code
South Orleans MA 02662-0337

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 7 / 2 0 0 9

Transaction ID: 2009M04L11ai02983

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Vernon Rabel

Mailing Address 1145 County Road 218

City State Zip Code
Weimar TX 78962-5183

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 465.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai02984

Amount of Each Receipt this Period
150.00

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 1002 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Vernon Rabel

Mailing Address 1145 County Road 218

City State Zip Code
Weimar TX 78962-5183

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 465.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai02985

Amount of Each Receipt this Period
165.00

B.

Full Name (Last, First, Middle Initial)
Mr. Vernon Rabel

Mailing Address 1145 County Road 218

City State Zip Code
Weimar TX 78962-5183

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 465.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai02986

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bobby Rackler

Mailing Address 1881 N Us 385

City State Zip Code
Levelland TX 79336

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Farmer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai02987

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

565.00

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 1003 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William Raffaele, Jr.
Mailing Address 1040 Brazos Heights Road

City State Zip Code
Mineral Wells TX 76067-1730

FEC ID number of contributing federal political committee. **C**

Name of Employer Self - Employed Occupation President

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai02988
Amount of Each Receipt this Period: 110.00

B. Full Name (Last, First, Middle Initial)
Ms. Eloise Ragland
Mailing Address 1815 Sherry Lea Drive

City State Zip Code
Neosho MO 64850-2930

FEC ID number of contributing federal political committee. **C**

Name of Employer Ragland Mills, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai02989
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Dr. John M. Rainey
Mailing Address 309 Coulee Croche Road

City State Zip Code
Sunset LA 70584-5909

FEC ID number of contributing federal political committee. **C**

Name of Employer Louisiana Oncology Associates Occupation Physician

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai02990
Amount of Each Receipt this Period: 200.00

SUBTOTAL of Receipts This Page (optional) ► 560.00

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 1004 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Ronald Paul Rainey

Mailing Address 315 S. Beverly Drive
Suite 407

City State Zip Code
Beverly Hills CA 90212-4301

FEC ID number of contributing federal political committee. **C**

Name of Employer Ron Rainey Management, Inc.
Occupation Personal Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai02991

Amount of Each Receipt this Period
220.00

B. Full Name (Last, First, Middle Initial)
Ms. Lynanne G. Rales

Mailing Address 6800 Hillmead Road

City State Zip Code
Bethesda MD 20817-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker
Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai02992

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Ms. Christine A. Ralphs

Mailing Address 26314 Ravenhill Road

City State Zip Code
Santa Clarita CA 91387-4047

FEC ID number of contributing federal political committee. **C**

Name of Employer Crossmark So California
Occupation Account Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai02993

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **2320.00**

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 1005 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Christine A. Ralphs	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 26314 Ravenhill Road	Transaction ID: 2009M04L11ai02994
	City State Zip Code Santa Clarita CA 91387-4047	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Crossmark So California Occupation Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ms. Christine A. Ralphs	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 26314 Ravenhill Road	Transaction ID: 2009M04L11ai02995
	City State Zip Code Santa Clarita CA 91387-4047	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Crossmark So California Occupation Account Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Thomas Ralston	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 14235 Ridgemontrdrive	Transaction ID: 2009M04L11ai02996
	City State Zip Code Urbandale IA 50323-2284	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer U.S.Army Occupation Ret. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	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 1006 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Hobart G. Rand

Mailing Address 2783 Elm Street

City State Zip Code
Manchester NH 03104-1657

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai02997

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
John L Randall

Mailing Address 219 N High St

City State Zip Code
Mankato KS 66956

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai02998

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Clyde E. Rankin, III

Mailing Address 10 W. 66Th Street
Apartment 18F

City State Zip Code
New York NY 10023-6210

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai02999

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 1007 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. David H. Rankin	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 3631 Cypress Club Drive	Transaction ID: 2009M04L11ai03000
	City State Zip Code Charlotte NC 28210-2460	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Margie A. Rankin	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 3007 Bowman Street	Transaction ID: 2009M04L11ai03001
	City State Zip Code Las Cruces NM 88005-3704	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Las Cruces Public Schools Occupation Ret. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert L. Rankin	Date of Receipt MM / DD / YYYY 03 / 19 / 2009
	Mailing Address P.O. Box 168	Transaction ID: 2009M04L11ai03002
	City State Zip Code Yakima WA 98907-0168	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

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 1008 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. William D. Rankin	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 220 N. Dithridge Street Apartment 1000	Transaction ID: 2009M04L11ai03003
	City Pittsburgh State PA Zip Code 15213-1425	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Ms. Mary L. Rankin Waters	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 100 Harbor View Dr. Apartment 403	Transaction ID: 2009M04L11ai03004
	City Port Washington State NY Zip Code 11050-4719	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Jaak E. Rannik	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 1530 Salvatierra Drive	Transaction ID: 2009M04L11ai03005
	City Coral Gables State FL Zip Code 33134-6240	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer B. & R. Group, Inc. Occupation Businessman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

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 1009 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Reba B. Ransom

Mailing Address 7131 E. 6Th Avenue

City	State	Zip Code
Denver	CO	80220-5532

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai03006

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Mary C. Rasicot

Mailing Address 32 Fitzys Way

City	State	Zip Code
North Attleboro	MA	02760-4223

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai03007

Amount of Each Receipt this Period
110.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bruce D. Rasmussen

Mailing Address 10385 Rue Chantemar

City	State	Zip Code
San Diego	CA	92131-2260

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03008

Amount of Each Receipt this Period
180.00

SUBTOTAL of Receipts This Page (optional) ▶

390.00

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 1010 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Geoffrey Rausch		Date of Receipt																					
	Mailing Address 5075 Southlake Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	3		2	0	9															
	City State Zip Code Alpharetta GA 30005-4334		Transaction ID: 2009M04L11ai03009																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00																						
Name of Employer Retired		Occupation Retired																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00																						

B.	Full Name (Last, First, Middle Initial) Mr. Timothy J. Raver		Date of Receipt																					
	Mailing Address P.O.Box 2315 445 Aspen Drive #7		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	0		2	0	9															
	City State Zip Code Jackson WY 83001-2315		Transaction ID: 2009M04L11ai03010																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00																						
Name of Employer Self-Employed		Occupation Self-Employed																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00																						

C.	Full Name (Last, First, Middle Initial) Mr. Eugene A. Ravizza		Date of Receipt																					
	Mailing Address 9 O'Keefe Lane		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	9		2	0	9															
	City State Zip Code Los Altos Hills CA 94022-4610		Transaction ID: 2009M04L11ai03011																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00																						
Name of Employer Retired		Occupation Retired																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00																						

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1011 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Richard Rawlings

Mailing Address 6 Greenmeadow Lane

City State Zip Code
Bedford NH 03110-6301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03012

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert Rawlings

Mailing Address P.O. Box 4040

City State Zip Code
Pueblo CO 81003-0040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03013

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. James R. Ray

Mailing Address 1444 Mulberry Road

City State Zip Code
Barnwell SC 29812-5440

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai03014

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1012 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Bruce A. Raymond

Mailing Address 218 Salem Drive

City State Zip Code
Pittsburgh PA 15241-2226

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03015

Amount of Each Receipt this Period
750.00

B. Full Name (Last, First, Middle Initial)
Ms Beverly J. Razook

Mailing Address 185 S. Avenida Felipe

City State Zip Code
Anaheim CA 92807-3735

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03016

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Bonnie L. Re

Mailing Address 5668 N.W. 23Rd Terrace

City State Zip Code
Boca Raton FL 33496-2804

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai03017

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 1013 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Bonnie L. Re

Mailing Address 5668 N.W. 23Rd Terrace

City State Zip Code
Boca Raton FL 33496-2804

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03018

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Bonnie L. Re

Mailing Address 5668 N.W. 23Rd Terrace

City State Zip Code
Boca Raton FL 33496-2804

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03019

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)

Mr. Ralph M Reahard, III

Mailing Address 15310 Amberly Drive
Suite 250

City State Zip Code
Tampa FL 33647-1642

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 0 9

Transaction ID: 2009M04L11ai03020

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

550.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1014 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Ralph M Reahard, III

Mailing Address 15310 Amberly Drive
Suite 250

City Tampa State FL Zip Code 33647-1642

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 5 / 2 0 0 9

Transaction ID: 2009M04L11ai03021

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Keith Reames

Mailing Address 4005 Castlerock Road

City Norman State OK Zip Code 73072-1751

FEC ID number of contributing federal political committee. **C**

Name of Employer Edward Jones Occupation Financial Advisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 9

Transaction ID: 2009M04L11ai03022

Amount of Each Receipt this Period
550.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Jane F. Rector

Mailing Address 325 N. Broadway

City Azle State TX Zip Code 76020-3745

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 9

Transaction ID: 2009M04L11ai03023

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

1100.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1015 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John Redmond

Mailing Address 18860 Jug Street

City State Zip Code
Garrettsville OH 44231-9548

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
R.S.B. Spine, L.L.C. C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03024

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Verlin Reece

Mailing Address 224 Lake Vista Lane

City State Zip Code
Commerce GA 30529-4230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Quality Foods Commerce Inc Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03025

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard H. Reel

Mailing Address P.O. Box 143

City State Zip Code
Douglas MI 49406-0143

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03026

Amount of Each Receipt this Period
135.00

SUBTOTAL of Receipts This Page (optional) ► **735.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1016 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Gunther & Joan M. Reese	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 15736 Glenisle Way	Transaction ID: 2009M04L11ai03027
	City State Zip Code Fort Myers FL 33912-3922	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Maurice J. Reese	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 713 Lakewood Blvd.	Transaction ID: 2009M04L11ai03028
	City State Zip Code Madison WI 53704-6048	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

C.	Full Name (Last, First, Middle Initial) Mr. Maurice J. Reese	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 713 Lakewood Blvd.	Transaction ID: 2009M04L11ai03029
	City State Zip Code Madison WI 53704-6048	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	1050.00
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 1017 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Patricia A. Reese

Mailing Address 1063 Hillsboro Mile
Apartment 606

City Hillsboro Beach State FL Zip Code 33062-2164

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03030

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Stephen F. Reeves

Mailing Address 104 Woodbrook Ln.

City Baltimore State MD Zip Code 21212-1034

FEC ID number of contributing federal political committee. **C**

Name of Employer The Black and Decker Corp. Occupation Finance

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai03031

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Maria Teresa Regirer

Mailing Address 9 Roslyn Hills Drive

City Richmond State VA Zip Code 23229-7912

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03032

Amount of Each Receipt this Period
50.00

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 1018 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Maria Teresa Regirer		Date of Receipt	
	Mailing Address 9 Roslyn Hills Drive		M M / D D / Y Y Y Y Y 03 / 20 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03033
	Richmond	VA	23229-7912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		550.00		

B.	Full Name (Last, First, Middle Initial) Lt. Col. Edward R. Regis		Date of Receipt	
	Mailing Address 21292 Twining Avenue		M M / D D / Y Y Y Y Y 03 / 26 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03034
	Riverside	CA	92518-2838	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		245.00		

C.	Full Name (Last, First, Middle Initial) Mr. Joseph P. Rehonic		Date of Receipt	
	Mailing Address P.O. Box 18979		M M / D D / Y Y Y Y Y 03 / 10 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03035
	Panama City	FL	32417-8979	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		400.00	
Name of Employer Self		Occupation Builder Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		850.00		

SUBTOTAL of Receipts This Page (optional)	▶	550.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1019 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Joseph P. Rehonic		Date of Receipt
	Mailing Address P.O. Box 18979		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 13 / 2009
	City	State	Zip Code
	Panama City	FL	32417-8979
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03036
		Amount of Each Receipt this Period	<input type="text"/> 250.00
Name of Employer Self		Occupation Builder Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 850.00

B.	Full Name (Last, First, Middle Initial) Mr. Edwin Reid		Date of Receipt
	Mailing Address 4719 Idlewilde Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	Shady Side	MD	20764-9788
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03037
		Amount of Each Receipt this Period	<input type="text"/> 225.00
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 225.00

C.	Full Name (Last, First, Middle Initial) Mr. Charles G. Reimers		Date of Receipt
	Mailing Address 300 S. 16Th Street Apartment 608		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Omaha	NE	68102-0037
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03038
		Amount of Each Receipt this Period	<input type="text"/> 50.00
Name of Employer University Of Nebraska At Oklahoma		Occupation Security Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 240.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 525.00
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 1020 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Charles G. Reimers

Mailing Address 300 S. 16Th Street
Apartment 608

City Omaha State NE Zip Code 68102-0037

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Nebraska At Oklahoma Occupation Security Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03039

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Charles G. Reimers

Mailing Address 300 S. 16Th Street
Apartment 608

City Omaha State NE Zip Code 68102-0037

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Nebraska At Oklahoma Occupation Security Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03040

Amount of Each Receipt this Period
20.00

C.

Full Name (Last, First, Middle Initial)
Mr. Charles G. Reimers

Mailing Address 300 S. 16Th Street
Apartment 608

City Omaha State NE Zip Code 68102-0037

FEC ID number of contributing federal political committee. **C**

Name of Employer University Of Nebraska At Oklahoma Occupation Security Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03041

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 90.00

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 1021 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms Doris Rein

Mailing Address 9318 N. Main Street

City Baytown State TX Zip Code 77521-8753

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai03042
Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
Mr. David S. Rendall

Mailing Address 8704 Highhill Road

City Raleigh State NC Zip Code 27615-2038

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 10 / 2009
Transaction ID: 2009M04L11ai03043
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Bernd W. Renner

Mailing Address 216 Mira Mar Avenue
Apartment C.

City Long Beach State CA Zip Code 90803-6162

FEC ID number of contributing federal political committee. **C**

Name of Employer Southwest Marine Inc. Occupation Superintendent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai03044
Amount of Each Receipt this Period: 300.00

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 1022 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Daniel Renner		Date of Receipt		
	Mailing Address 3540 N. Hualapai Way Apartment 1025		M M / D D / Y Y Y Y Y 03 / 05 / 2009		
	City Las Vegas	State NV	Zip Code 89129-3884	Transaction ID: 2009M04L11ai03045	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00		
	Name of Employer Station Casinos	Occupation Quality Supervisor		Aggregate Year-to-Date 310.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jack Rentz		Date of Receipt		
	Mailing Address 18 Pinehurst		M M / D D / Y Y Y Y Y 03 / 25 / 2009		
	City Abilene	State TX	Zip Code 79606-5071	Transaction ID: 2009M04L11ai03046	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00		
	Name of Employer Rentech Boiler Systems	Occupation Owner		Aggregate Year-to-Date 250.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Michele Reppucci		Date of Receipt		
	Mailing Address 1224 2Nd Street		M M / D D / Y Y Y Y Y 03 / 26 / 2009		
	City Manhattan Beach	State CA	Zip Code 90266-6837	Transaction ID: 2009M04L11ai03047	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00		
	Name of Employer Retired	Occupation Retired		Aggregate Year-to-Date 250.00	

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 1023 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ltc. Patrick E. Resley

Mailing Address 7336 N. Mountain Shadows Drive

City Tucson State AZ Zip Code 85718-1071

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 565.00

Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai03048
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Samuel J. Revak

Mailing Address 2491 Linwood Lane

City Woodbridge State VA Zip Code 22192-3402

FEC ID number of contributing federal political committee. **C**

Name of Employer I.T.E.S. Occupation Clerk

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 04 / 2009
Transaction ID: 2009M04L11ai03049
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert L. Rewey

Mailing Address 810 S. Ocean Boulevard

City Palm Beach State FL Zip Code 33480-4815

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai03050
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: PAGE 1024 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Beverly Reynolds

Mailing Address 510 Barrington Road

City State Zip Code
Signal Mountain TN 37377-3135

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai03051

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Neil V. Reynolds

Mailing Address P.O. Box 24

City State Zip Code
Leadville CO 80461-0024

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03052

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ranolph Reynolds, Jr.

Mailing Address 3 Partridge Hill Road

City State Zip Code
Richmond VA 23238-6219

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai03053

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 1025 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard W. Reynolds

Mailing Address 815 Bragor 78701
Apartment 11

City Austin State TX Zip Code 78703-1066

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai03054
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Lloyd E. Rhian, Jr.

Mailing Address 1 Bob White Trail

City Hattiesburg State MS Zip Code 39402-9621

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai03055
Amount of Each Receipt this Period 225.00

C. Full Name (Last, First, Middle Initial)
Mr. Lloyd V. Rhinhart

Mailing Address P.O. Box 658
67770 Rocky

City Pilot Rock State OR Zip Code 97868-0658

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai03056
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 425.00

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 1026 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lloyd V. Rhinhart

Mailing Address P.O. Box 658
67770 Rocky

City Pilot Rock State OR Zip Code 97868-0658

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03057

Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles Rhoden

Mailing Address 525 Rhodora Heights Road

City Lake Stevens State WA Zip Code 98258-9721

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03058

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles Rhoden

Mailing Address 525 Rhodora Heights Road

City Lake Stevens State WA Zip Code 98258-9721

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt: MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03059

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 1027 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Charles Rhoden	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 525 Rhodora Heights Road	Transaction ID: 2009M04L11ai03060
	City State Zip Code Lake Stevens WA 98258-9721	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) Dr. Dennis Alfred Rhyne	Date of Receipt MM / DD / YYYY 03 / 25 / 2009
	Mailing Address 24951 Sausalito Street	Transaction ID: 2009M04L11ai03061
	City State Zip Code Laguna Hills CA 92653-5627	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. Willard Rhyne	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address P.O. Box 38	Transaction ID: 2009M04L11ai03062
	City State Zip Code Ada OK 74821-0038	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

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 1028 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Harlan R. Ribnik

Mailing Address P.O. Box 628

City State Zip Code
Cheyenne WY 82003-0628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03063

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Katherine Ricart

Mailing Address 19416 Mill Dam Place

City State Zip Code
Lansdowne VA 20176-8426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bds/Caci Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03064

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. George Ricci

Mailing Address 931 Metro Drive

City State Zip Code
Monterey Park CA 91755-4233

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Rainshow's Manufacturing Self-employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03065

Amount of Each Receipt this Period
500.00

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 1029 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Andrea Lynne Rice

Mailing Address 7200 Capilla Court

City State Zip Code
Coral Gables FL 33143-6113

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai03066

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Joseph Rice

Mailing Address 2020 N. Plantation Dr.

City State Zip Code
Dunkirk MD 20754-9763

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai03067

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Sam Rice

Mailing Address 28720 E. River Road

City State Zip Code
Perrysburg OH 43551-2728

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai03068

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶

950.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1030 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Bill Richardson	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 7205 Nichols Road	Transaction ID: 2009M04L11ai03069
	City State Zip Code Oklahoma City OK 73120-1223	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer 1St Enterprise Bank Occupation Banker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

B.	Full Name (Last, First, Middle Initial) Ms. Monte F. Richardson	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 36 Lambeth Drive	Transaction ID: 2009M04L11ai03070
	City State Zip Code Asheville NC 28803-3431	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00

C.	Full Name (Last, First, Middle Initial) Mr. Donald G. Richerson	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 890 Greenview	Transaction ID: 2009M04L11ai03071
	City State Zip Code Collierville TN 38017-1436	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00

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 1031 / 1945
(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
							17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Donald Richter

Mailing Address 8578 Edgeware Way

City Elk Grove State CA Zip Code 95758-6783

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai03072

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Henry B. Rickenbaker

Mailing Address 1004 Ackerman Drive

City Summerton State SC Zip Code 29148-7550

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03073

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Miss Roberta Riddell

Mailing Address 1889 E. State Road 44
Apartment 9

City Connersville State IN Zip Code 47331-9171

FEC ID number of contributing federal political committee. **C**

Name of Employer D.D.B. Worldwide Occupation Broadcast Business Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03074

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1032 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Miss Roberta Riddell

Mailing Address 1889 E. State Road 44
Apartment 9

City State Zip Code
Connersville IN 47331-9171

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
D.D.B. Worldwide Broadcast Business Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03075

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steven W Riebel

Mailing Address 145 Dodge Rd

City State Zip Code
Boerne TX 78006-8526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 2009M04L11ai03076

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Bernard Riechers

Mailing Address 11838 Alder Street N.W.

City State Zip Code
Coon Rapids MN 55448-2427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Trane Company Finance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai03077

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

800.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1033 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. John A. Riedman

Mailing Address P.O. Box 528257

City State Zip Code
Flushing NY 11352-8257

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 295.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai03078

Amount of Each Receipt this Period

295.00

B.

Full Name (Last, First, Middle Initial)

Mr. Franklin Riehlman

Mailing Address 138 Van Cortlandt Park S.

City State Zip Code
Bronx NY 10463-2505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai03079

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mrs. L. Susan Riepenhoff

Mailing Address 130 Jett Forest Court N.W.

City State Zip Code
Atlanta GA 30327-4519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai03080

Amount of Each Receipt this Period

440.00

SUBTOTAL of Receipts This Page (optional)

835.00

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 1034 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Ms. Cheryl Riggs
 Mailing Address 137 E. Arctic Avenue
 City Palmer State AK Zip Code 99645-6255
 Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai03081
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Great Northern Engineering Occupation Officer Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 250.00

B. Full Name (Last, First, Middle Initial)
 Mr. & Mrs. James R. Riggs
 Mailing Address 3718 Villanova Street
 City Dallas State TX Zip Code 75225-5111
 Date of Receipt 03 / 11 / 2009
Transaction ID: 2009M04L11ai03082
 Amount of Each Receipt this Period 300.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 300.00

C. Full Name (Last, First, Middle Initial)
 Mrs. Carol C Riley
 Mailing Address 167 Main Entrance Dr
 City Pittsburgh State PA Zip Code 15228
 Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai03083
 Amount of Each Receipt this Period 200.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Requested Occupation Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 400.00

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 1035 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Carol C Riley		Date of Receipt
	Mailing Address 167 Main Entrance Dr		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Pittsburgh	PA	15228
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03084
Name of Employer Requested		Occupation Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="200.00"/>
		<input type="text" value="400.00"/>	

B.	Full Name (Last, First, Middle Initial) Ms. Inga Rindal		Date of Receipt
	Mailing Address 4600 41St Avenue North Apartment 404		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Robbinsdale	MN	55422-1857
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03085
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="15.00"/>
		<input type="text" value="215.00"/>	

C.	Full Name (Last, First, Middle Initial) Ms. Inga Rindal		Date of Receipt
	Mailing Address 4600 41St Avenue North Apartment 404		<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Robbinsdale	MN	55422-1857
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03086
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="215.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="315.00"/>
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 1036 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Sarah Uzzell Rindlaub

Mailing Address 8441 S.E. 68Th Street
Apartment 217

City Mercer Island State WA Zip Code 98040-5235

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03087

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Wade A Riner

Mailing Address 411 Strey Ln

City Houston State TX Zip Code 77024-5064

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03088

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles A. Rini, Sr.

Mailing Address 924 Westpoint Parkway
Suite 150

City Westlake State OH Zip Code 44145

FEC ID number of contributing federal political committee. **C**

Name of Employer Rini Realty Company Occupation Ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03089

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 1037 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. James K. Risk, III	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 1709 S. 9Th Street	Transaction ID: 2009M04L11ai03090
	City State Zip Code Lafayette IN 47905-2128	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Kirby Risk Corporation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. David A. Rismiller	Date of Receipt MM / DD / YYYY 03 / 17 / 2009
	Mailing Address 4021 Gulf Shore Blvd. N. The Brittany 1006	Transaction ID: 2009M04L11ai03091
	City State Zip Code Naples FL 34103-3471	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Carolyn Ritchie	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 2411 Station Road	Transaction ID: 2009M04L11ai03092
	City State Zip Code Middletown MD 21769-9114	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
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 1038 / 1945
	(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) William L Ritchie		Date of Receipt
	Mailing Address 5302 Brookeway Dr		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Bethesda	MD	20816-1308
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03093
		Amount of Each Receipt this Period	
		<input type="text" value="100.00"/>	
Name of Employer Ret.		Occupation	
		N/A	
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"/>	

B.	Full Name (Last, First, Middle Initial) Dr. Sam Rizk		Date of Receipt
	Mailing Address 7845 Wills Run Lane		<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Blacklick	OH	43004-8525
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03094
		Amount of Each Receipt this Period	
		<input type="text" value="500.00"/>	
Name of Employer		Occupation	
C.A.I.		Physician	
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"/>	

C.	Full Name (Last, First, Middle Initial) Mr. George A. Rizzo		Date of Receipt
	Mailing Address 4 Winners Circle		<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77024-2755
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03095
		Amount of Each Receipt this Period	
		<input type="text" value="220.00"/>	
Name of Employer		Occupation	
Retired		Retired	
Receipt For:		Aggregate Year-to-Date	
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="220.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="820.00"/>
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 1039 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Gerald J. Roba	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 621 Lechauwecki Avenue	Transaction ID: 2009M04L11ai03096
	City State Zip Code Fountain Hill PA 18015-4315	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) Mr. Daniel Robbins	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 4498 Lakewood Blvd.	Transaction ID: 2009M04L11ai03097
	City State Zip Code Naples FL 34112-6124	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

C.	Full Name (Last, First, Middle Initial) Mrs. Belinda Gayle Robbs	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 734 Knob Hill Court	Transaction ID: 2009M04L11ai03098
	City State Zip Code Argyle TX 76226-4640	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

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 1040 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Dorothy B. Roberts

Mailing Address 1970 Lemon Ranch Road

City State Zip Code
Santa Barbara CA 93108-2257

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03099

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. John H. Roberts

Mailing Address 261 Riverway Drive

City State Zip Code
Vero Beach FL 32963-2645

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03100

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Lynne King Roberts

Mailing Address 1449 Janet Street

City State Zip Code
Sycamore IL 60178-1056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03101

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 1041 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard T Roberts

Mailing Address 3239 Lakeshore Ct.

City State Zip Code
Stockton CA 95219-5491

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03102

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Troy Roberts

Mailing Address P.O. Box 3252

City State Zip Code
Conroe TX 77305-3252

FEC ID number of contributing federal political committee. **C**

Name of Employer City Of Conroe Occupation Police Detective

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 25 / 2009

Transaction ID: 2009M04L11ai03103

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Clarence B. Robertson, III

Mailing Address 9020 Stony Point Parkway
Suite 145

City State Zip Code
Richmond VA 23235-1953

FEC ID number of contributing federal political committee. **C**

Name of Employer Landvest, L.L.C. Occupation Land Developer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai03104

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 1042 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Judy B. Robertson		Date of Receipt																					
	Mailing Address P. O. Box 275		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	7		2	0	0	9														
	City State Zip Code Zapata TX 78076-0275		Transaction ID: 2009M04L11ai03105																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Homemaker Occupation: Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		100.00																						

B.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Kenneth N. Robertson		Date of Receipt																					
	Mailing Address 12 Stillforest Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	0		2	0	0	9														
	City State Zip Code Houston TX 77024-7518		Transaction ID: 2009M04L11ai03106																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		200.00																						

C.	Full Name (Last, First, Middle Initial) Mr. Samuel Harry Robertson		Date of Receipt																					
	Mailing Address 5994 E. Orange Blossom Lane		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	4		2	0	0	9														
	City State Zip Code Phoenix AZ 85018-6733		Transaction ID: 2009M04L11ai03107																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		200.00																						

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 1043 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Bill Robinson
Mailing Address 2634 Harris Ln.
City Niles State MI Zip Code 49120-5045
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai03108
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Joe D. Robinson
Mailing Address 7803 Garden Road
City Sugar Land State TX Zip Code 77479-6133
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 25 / 2009
Transaction ID: 2009M04L11ai03109
Amount of Each Receipt this Period 125.00

C. Full Name (Last, First, Middle Initial)
Mr. Joe D. Robinson
Mailing Address 7803 Garden Road
City Sugar Land State TX Zip Code 77479-6133
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai03110
Amount of Each Receipt this Period 125.00

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 1044 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Samuel H. Robinson

Mailing Address 6815 Kentucky Highway 643

City State Zip Code
Crab Orchard KY 40419

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03111

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Dr. Carolyn Robison

Mailing Address 1057 Capital Club Circle N.E.

City State Zip Code
Atlanta GA 30319-2662

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03112

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Adela I Robles

Mailing Address 1017 Palisade Avenue

City State Zip Code
Fort Lee NJ 07024-6320

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03113

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 1045 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. David M. Roby		Date of Receipt		
	Mailing Address 7 Bliss Lane P.O. Box 266		M M / D D / Y Y Y Y Y 03 / 05 / 2009		
	City Lyme	State NH	Zip Code 03768-0266	Transaction ID: 2009M04L11ai03114	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00		
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00			

B.	Full Name (Last, First, Middle Initial) Fred & Mary Roby		Date of Receipt		
	Mailing Address 6435 N. Camino De Michael		M M / D D / Y Y Y Y Y 03 / 12 / 2009		
	City Tucson	State AZ	Zip Code 85718-1939	Transaction ID: 2009M04L11ai03115	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00		
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Mr. Joseph L. Rocco		Date of Receipt		
	Mailing Address 24664 Cordillera Drive		M M / D D / Y Y Y Y Y 03 / 20 / 2009		
	City Calabasas	State CA	Zip Code 91302-2511	Transaction ID: 2009M04L11ai03116	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00		
	Name of Employer Self-Employed	Occupation Self-Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

SUBTOTAL of Receipts This Page (optional)	5750.00
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 1046 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Jamie Rochelle

Mailing Address 107 Heath Drive

City Ruidoso State NM Zip Code 88345-7230

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai03117

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Dawn Rock

Mailing Address 13620 N 19th Street

City Phx State AZ Zip Code 85022-5064

FEC ID number of contributing federal political committee. **C**

Name of Employer Phx Union Hs Distr. Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 02 / 2009

Transaction ID: 2009M04L11ai03118

Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Dawn Rock

Mailing Address 13620 N 19th Street

City Phx State AZ Zip Code 85022-5064

FEC ID number of contributing federal political committee. **C**

Name of Employer Phx Union Hs Distr. Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai03119

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 525.00

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 1047 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. William I. Rockefeller

Mailing Address 1658 Gifford Road

City State Zip Code
Phelps NY 14532-9736

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03120

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Donald R. Rodeghier

Mailing Address 1440 Township Avenue

City State Zip Code
Wisc Rapids WI 54494-6332

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03121

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joey L. Rodell

Mailing Address P.O. Box 504

City State Zip Code
Buffalo TX 75831-0504

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03122

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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 1048 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Richard L Rodgers, U.S.N. (Re

Mailing Address 9591 Larkview Court

City State Zip Code
Fairfax Station VA 22039-3370

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
The Livingston Group Consultant

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai03123

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)

Mr. George Rodrick

Mailing Address 30534 Union City Boulevard

City State Zip Code
Union City CA 94587-1518

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai03124

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert L. Roesler

Mailing Address 4035 S. 84Th Street
Apartment 3

City State Zip Code
Greenfield WI 53228-2335

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homes For Independent Living Caregiver

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai03125

Amount of Each Receipt this Period
85.00

SUBTOTAL of Receipts This Page (optional) ▶

835.00

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 1049 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Hugh Roff

Mailing Address 333 Clay Street
Suite 4300

City State Zip Code
Houston TX 77002-4004

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03126

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Joe M. Rogers, Sr.

Mailing Address 937 Highway 7 N.

City State Zip Code
Camden AR 71701-8705

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03127

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. John E. Rogers

Mailing Address 55 Westy Monroe
Apartment 2400

City State Zip Code
Chicago FL 60603-1202

FEC ID number of contributing federal political committee. **C**

Name of Employer Alzheimer & Gray Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03128

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1050 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Patricia Rogers	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 1200 N. Montesano Street P.O. Box 1407	Transaction ID: 2009M04L11ai03129
	City State Zip Code Westport WA 98595-1407	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

B.	Full Name (Last, First, Middle Initial) Ms. Roberta F. Rogers	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 14515 W. Granite Valley Drive Apartment E567	Transaction ID: 2009M04L11ai03130
	City State Zip Code Sun City West AZ 85375-6024	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Homemaker Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

C.	Full Name (Last, First, Middle Initial) Mr. Sidney D. Rogers	Date of Receipt MM / DD / YYYY 03 / 04 / 2009
	Mailing Address 420 N. Hayfield Road	Transaction ID: 2009M04L11ai03131
	City State Zip Code Winchester VA 22603-3426	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00

SUBTOTAL of Receipts This Page (optional)	▶	320.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1051 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Sidney D. Rogers

Mailing Address 420 N. Hayfield Road

City Winchester State VA Zip Code 22603-3426

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt 03 / 18 / 2009
Transaction ID: 2009M04L11ai03132
 Amount of Each Receipt this Period 120.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. William A. Rogers, III

Mailing Address 2400 South Ocean Drive
Apartment 4100D

City Ft. Pierce State FL Zip Code 34949

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai03133
 Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Don Rogert

Mailing Address 26515 Blondo Court

City Waterloo State NE Zip Code 68069-6221

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai03134
 Amount of Each Receipt this Period 200.00

SUBTOTAL of Receipts This Page (optional) ► 1320.00

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 1052 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Thomas Rohde

Mailing Address 19 Emerald Drive

City Throop State PA Zip Code 18512-3351

FEC ID number of contributing federal political committee. **C**

Name of Employer Wyoming Valley Health Care Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY 03 / 31 / 2009

Transaction ID: 2009M04L11ai03135

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Beth Rohr

Mailing Address 6650 East Ida Avenue

City Greenwood Village State CO Zip Code 80111-1700

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY 03 / 20 / 2009

Transaction ID: 2009M04L11ai03136

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Frank H. Roland

Mailing Address 26 Boyds Landing

City Okatie State SC Zip Code 29909-7004

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: MM / DD / YYYY 03 / 02 / 2009

Transaction ID: 2009M04L11ai03137

Amount of Each Receipt this Period 400.00

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 1053 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Jean E. Rolles	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 3087 La Pietra Circle Apartment 21	Transaction ID: 2009M04L11ai03138
	City Honolulu State HI Zip Code 96815-4736	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Outrigger Enterprises, Inc. Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Ms. Sarah W. Rollins	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 65 Ruggles Lane	Transaction ID: 2009M04L11ai03139
	City Milton State MA Zip Code 02186-2923	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Daniel J. Roltgen	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 1829 Field Cliffe Drive	Transaction ID: 2009M04L11ai03140
	City Richfield State WI Zip Code 53076-9646	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 265.00	

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
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 1054 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Sal Romano

Mailing Address 750-41B Lido Blvd

City State Zip Code
Lido Beach NY 11561-5297

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
R and R Restaraunts Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	6	/	2	0	0	9

Transaction ID: 2009M04L11ai03141

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Ms. Lois S. Roon

Mailing Address 1040 Genter Street
Unit 304

City State Zip Code
La Jolla CA 92037-5551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: 2009M04L11ai03142

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Robert Rosado

Mailing Address 10328 Amaro Court

City State Zip Code
San Diego CA 92124-1215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tea Systems Engineer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	9

Transaction ID: 2009M04L11ai03143

Amount of Each Receipt this Period
500.00

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 1055 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Bufford Rose

Mailing Address 7 Stacy Street

City

Harold

State

KY

Zip Code

41635-7031

FEC ID number of contributing federal political committee.

C

Name of Employer
Rose Builders

Occupation

Carpenter / Contractor

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai03144

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mrs. Katy E. Rose

Mailing Address 3027 S. Hill Road

City

Milford

State

MI

Zip Code

48381-3520

FEC ID number of contributing federal political committee.

C

Name of Employer
Epc

Occupation

Svp

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03145

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Mr. Paul W. Rose

Mailing Address 1917 Solo Road

City

Covington

State

TN

Zip Code

38019-4765

FEC ID number of contributing federal political committee.

C

Name of Employer
Rose Construction

Occupation

Building Contractor

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03146

Amount of Each Receipt this Period

205.00

SUBTOTAL of Receipts This Page (optional) ▶

855.00

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 1056 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Vincent J. Rose

Mailing Address 100 Dandelion Lane

City Marquette State MI Zip Code 49855-9387

FEC ID number of contributing federal political committee. **C**

Name of Employer Employee Benefits Agency, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai03147

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Jack C. Rosenau

Mailing Address 1177 Old Fort Drive

City Tallahassee State FL Zip Code 32301-4663

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai03148

Amount of Each Receipt this Period 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Jack C. Rosenau

Mailing Address 1177 Old Fort Drive

City Tallahassee State FL Zip Code 32301-4663

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai03149

Amount of Each Receipt this Period 100.00

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: (check only one)	PAGE 1057 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
 Mr. & Mrs. Richard & Sara Rosene

Mailing Address P.O. Box 801

City State Zip Code
Kremmling CO 80459-0801

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. Government Occupation Forester

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **03 / 13 / 2009**

Transaction ID: 2009M04L11ai03150

Amount of Each Receipt this Period **100.00**

B.

Full Name (Last, First, Middle Initial)
 Ms. Lea R. Rosenfeld

Mailing Address 633 N. Sweetzer Avenue

City State Zip Code
West Hollywood CA 90048-2121

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Real Estate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 31 / 2009**

Transaction ID: 2009M04L11ai03151

Amount of Each Receipt this Period **50.00**

C.

Full Name (Last, First, Middle Initial)
 Mr. John Rosensteel

Mailing Address 1101 Horseshoe Drive

City State Zip Code
Greensboro GA 30642-4842

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 09 / 2009**

Transaction ID: 2009M04L11ai03152

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 1058 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Judy N. Ross	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 800 Pendleton Drive	Transaction ID: 2009M04L11ai03153
	City State Zip Code Salem VA 24153-2662	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Layman Candy Company, Inc. Occupation Secretary/Treasurer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. Marvin A. Ross	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 1035 Pine Drive	Transaction ID: 2009M04L11ai03154
	City State Zip Code West Chester PA 19380-1579	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1125.00	

C.	Full Name (Last, First, Middle Initial) Mr. Dois I. Rosser, Jr.	Date of Receipt MM / DD / YYYY 03 / 04 / 2009
	Mailing Address 4018 Chesapeake Avenue	Transaction ID: 2009M04L11ai03155
	City State Zip Code Hampton VA 23669-4632	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Pomoco Group Occupation Chairman Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	1800.00
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 1059 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Mary Jo Rosson	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address P.O. Box 483	Transaction ID: 2009M04L11ai03156
	City State Zip Code Calhoun GA 30703-0483	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1110.00	

B.	Full Name (Last, First, Middle Initial) Joey Rothman	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 7820 Inverness Blvd. E #405	Transaction ID: 2009M04L11ai03157
	City State Zip Code Englewood CO 80112-5716	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Cherry Hills Community Church Occupation Production Assistant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Charley H. Rougeau	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 307 Tanglewood Drive	Transaction ID: 2009M04L11ai03158
	City State Zip Code Alexandria LA 71303-3350	Amount of Each Receipt this Period 130.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Med South, L.L.C Occupation General Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 260.00	

SUBTOTAL of Receipts This Page (optional)	490.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1060 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Ronald T. Roundtree

Mailing Address 210 Trace Colony Park Drive

City State Zip Code
Ridgeland MS 39157-2864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai03159

Amount of Each Receipt this Period
600.00

B.

Full Name (Last, First, Middle Initial)
Mr. Ronald T. Roundtree

Mailing Address 210 Trace Colony Park Drive

City State Zip Code
Ridgeland MS 39157-2864

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai03160

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Paul Rouse

Mailing Address 75 East Maple Road

City State Zip Code
Greenlawn NY 11740-1123

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Peerless Engineer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03161

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ►

950.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1061 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Norman W. Rousselot

Mailing Address 126 Edgemont Road

City State Zip Code
Sonora TX 76950-6607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03162

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Norman W. Rousselot

Mailing Address 126 Edgemont Road

City State Zip Code
Sonora TX 76950-6607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai03163

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bruce Rowe

Mailing Address 540 Kelly Drive

City State Zip Code
Barstow CA 92311-2917

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
M.C.L.B. Barstow Mechanic

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03164

Amount of Each Receipt this Period
400.00

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 1062 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Ray C. Rowe

Mailing Address 2618 Habersham Avenue

City Columbus State GA Zip Code 31906-1353

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai03165
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Linda Rowland

Mailing Address 4521 E. Desert Cove Avenue

City Phoenix State AZ Zip Code 85028-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer Rowland Companies Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 03 / 2009
Transaction ID: 2009M04L11ai03166
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Ms. Janice Rubel

Mailing Address 2000 S. Bayshore Drive
Apartment 68

City Miami State FL Zip Code 33133-3252

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai03167
Amount of Each Receipt this Period: 450.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 1063 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Paul & Joan Rubschlager

Mailing Address 800 N. Michigan Avenue
Apartment 3002

City Chicago State IL Zip Code 60611-2153

FEC ID number of contributing federal political committee. **C**

Name of Employer Rubschlager Baking Corporation Occupation Bakery Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai03168
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Ms Ella Louise Rucker

Mailing Address 3712 Heath Street

City Greensboro State NC Zip Code 27401-4645

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai03169
Amount of Each Receipt this Period 60.00

C. Full Name (Last, First, Middle Initial)
Ms Ella Louise Rucker

Mailing Address 3712 Heath Street

City Greensboro State NC Zip Code 27401-4645

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai03170
Amount of Each Receipt this Period 60.00

SUBTOTAL of Receipts This Page (optional) ▶ 620.00

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 1064 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Wayne Rudd

Mailing Address 52 Flying Fish Road

City State Zip Code
Carbondale CO 81623-9566

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03171

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. G. W. Rudick

Mailing Address 300 Galbear Road

City State Zip Code
Lafayette LA 70506-1808

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03172

Amount of Each Receipt this Period
505.00

C.

Full Name (Last, First, Middle Initial)
Mr. David Rudolph

Mailing Address 8319 E. Calle De Alegria

City State Zip Code
Scottsdale AZ 85255-4226

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03173

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ► **975.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1065 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Tracy T. Rudolph

Mailing Address P.O. Box 70

City State Zip Code
Ellinger TX 78938-0070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai03174

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Troy Rudolph

Mailing Address 3506 Arrowhead Drive

City State Zip Code
Austin TX 78731-4802

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ca Software Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai03175

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Gary L. Ruebel

Mailing Address 11152 Aurora Avenue

City State Zip Code
Urbandale IA 50322-7903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03176

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 1066 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Gary L. Ruebel

Mailing Address 11152 Aurora Avenue

City State Zip Code
Urbandale IA 50322-7903

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03177

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steven A. Ruether

Mailing Address 2730 Colby Street

City State Zip Code
Sweden NY 14420-9766

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Bell Corporation Engineer

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03178

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Ms. Elizabeth Moore Ruffin

Mailing Address 1707 Jarvis Street

City State Zip Code
Raleigh NC 27608-2236

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai03179

Amount of Each Receipt this Period
650.00

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1067 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles A. Ruhl, Sr.
Mailing Address 106 Bechtel Road

City State Zip Code
Bettendorf IA 52722-4613

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 17 / 2009**
Transaction ID: 2009M04L11ai03180
Amount of Each Receipt this Period **150.00**

B. Full Name (Last, First, Middle Initial)
Mr. John R. Ruhl
Mailing Address 1 Holly Hill Road

City State Zip Code
Asheville NC 28803-3114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Steelcase Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 27 / 2009**
Transaction ID: 2009M04L11ai03181
Amount of Each Receipt this Period **100.00**

C. Full Name (Last, First, Middle Initial)
Mr. Edward T. Rule
Mailing Address 8344 242Nd Street

City State Zip Code
Bellerose NY 11426-1318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt **03 / 06 / 2009**
Transaction ID: 2009M04L11ai03182
Amount of Each Receipt this Period **180.00**

SUBTOTAL of Receipts This Page (optional) ► **430.00**

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 1068 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Christopher S. Rumana		Date of Receipt
	Mailing Address 2894 N Hannon Hill Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Tallahassee	FL	32309-8942
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03183
Name of Employer Baylor Coll. Of Med.		Occupation Physician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 300.00	<input type="text"/> 300.00

B.	Full Name (Last, First, Middle Initial) Mr. Gene W. Rummel		Date of Receipt
	Mailing Address 2824B Marquette Manor West Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Indianapolis	IN	46268-3815
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03184
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 750.00	<input type="text"/> 750.00

C.	Full Name (Last, First, Middle Initial) Mrs. Caroline Geiler Rush		Date of Receipt
	Mailing Address 26 Faulkner Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Ventura	CA	93003-5510
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03185
Name of Employer Wiggins Lift		Occupation Receptionist	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 350.00	<input type="text"/> 100.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1150.00
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 1069 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. June A. Russel-Glennon

Mailing Address 5191 E. Lakeside Drive

City State Zip Code
Palm Springs CA 92264-5912

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03186

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Dr. David S. Russell

Mailing Address 2113 Wilshire Drive

City State Zip Code
Enid OK 73703-6622

FEC ID number of contributing federal political committee. C

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai03187

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. John P. Russell

Mailing Address P.O. Box 117

City State Zip Code
Mill Creek WV 26280-0117

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai03188

Amount of Each Receipt this Period 70.00

SUBTOTAL of Receipts This Page (optional) 670.00

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 1070 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. John P. Russell

Mailing Address P.O. Box 117

City State Zip Code
Mill Creek WV 26280-0117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai03189

Amount of Each Receipt this Period
70.00

B.

Full Name (Last, First, Middle Initial)

Mr. Richard Warren Russell

Mailing Address 8 Pegan Lane
P.O. Box 638

City State Zip Code
Dover MA 02030-0638

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03190

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Jack Russi

Mailing Address 35 Grove Creek Court

City State Zip Code
Lafayette CA 94549-2200

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Deloitte & Touche Consultant

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai03191

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

5320.00

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 1071 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. William H. Rutledge, Jr.

Mailing Address 20813 N. 152Nd Drive

City State Zip Code
Sun City West AZ 85375-6519

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03192

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. John Ryan

Mailing Address 4 Arden Place

City State Zip Code
New City NY 10956-2811

FEC ID number of contributing federal political committee. **C**

Name of Employer Rolex Watch Usa, Inc. Occupation Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03193

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Kim Ryan

Mailing Address 1015 Ne Bryant Court

City State Zip Code
Lees Summit MO 64086-3536

FEC ID number of contributing federal political committee. **C**

Name of Employer Metcraft Industries Occupation Small Business Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03194

Amount of Each Receipt this Period
50.00

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 1072 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Kim Ryan		Date of Receipt	
	Mailing Address 1015 Ne Bryant Court		M M / D D / Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03195
	Lees Summit	MO	64086-3536	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
Name of Employer Metcraft Industries		Occupation Small Business Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

B.	Full Name (Last, First, Middle Initial) Mr. Wayne Ryan		Date of Receipt	
	Mailing Address 1606 S. 187Th Circle		M M / D D / Y Y Y Y 03 / 27 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03196
	Omaha	NE	68130-2809	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Streck, Inc		Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1000.00		

C.	Full Name (Last, First, Middle Initial) Mr. Robert C. Ryder		Date of Receipt	
	Mailing Address 3 Buckhorn Road		M M / D D / Y Y Y Y 03 / 12 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03197
	Jackson Springs	NC	27281-9752	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

SUBTOTAL of Receipts This Page (optional)	▶	1300.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1073 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ryan S

Mailing Address P.O. Box 237

City State Zip Code
Somerset WI 54025-0237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
School District Of Somers- Information Technology Manager
et

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

Transaction ID: 2009M04L11ai03198

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Alfred N. Sacha

Mailing Address 213 N. Talcott Rd.

City State Zip Code
Park Ridge IL 60068-2324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Lawyer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 825.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	9

Transaction ID: 2009M04L11ai03199

Amount of Each Receipt this Period

825.00

C.

Full Name (Last, First, Middle Initial)
Father J. Andrew Sack

Mailing Address 1913 Roanoke Avenue

City State Zip Code
Louisville KY 40205-1415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Saint Michael & All Angels Church Priest

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	9

Transaction ID: 2009M04L11ai03200

Amount of Each Receipt this Period

55.00

SUBTOTAL of Receipts This Page (optional)

980.00

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 1074 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Jean Sagouspe

Mailing Address 259 I Street

City Los Banos State CA Zip Code 93635-4114

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 27 / 2009

Transaction ID: 2009M04L11ai03201

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Sheryl Sahr

Mailing Address 400 Walnut Street #701

City Des Moines State IA Zip Code 50309-2393

FEC ID number of contributing federal political committee. **C**

Name of Employer The Iowa Clinic Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 02 / 2009

Transaction ID: 2009M04L11ai03202

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Ms Ramona Saldamando

Mailing Address 123 W. 92Nd Street

City New York State NY Zip Code 10025-7577

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt 03 / 25 / 2009

Transaction ID: 2009M04L11ai03203

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1075 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Mark L Salhaney		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 4500 Cascade Rd. Suite 107		Transaction ID: 2009M04L11ai03204		
	City Grand Rapids	State MI	Zip Code 49546	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self Occupation Dentistry		Aggregate Year-to-Date 250.00		

B.	Full Name (Last, First, Middle Initial) Mr. Alex Salley		Date of Receipt MM / DD / YYYY 03 / 02 / 2009		
	Mailing Address P.O. Box 997		Transaction ID: 2009M04L11ai03205		
	City Saluda	State NC	Zip Code 28773-0997	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested Occupation Requested		Aggregate Year-to-Date 300.00		

C.	Full Name (Last, First, Middle Initial) Mr. Ronald W. Salmon		Date of Receipt MM / DD / YYYY 03 / 02 / 2009		
	Mailing Address 12720 Hillcrest Rd		Transaction ID: 2009M04L11ai03206		
	City Dallas	State TX	Zip Code 75230-2035	Amount of Each Receipt this Period 300.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested Occupation Requested		Aggregate Year-to-Date 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 1076 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Oleta Salopek

Mailing Address 4915 Snow Road

City State Zip Code
Las Cruces NM 88005-4222

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03207

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Gregory I. Salsbury

Mailing Address 2465 W. La Palma Avenue

City State Zip Code
Anaheim CA 92801-2610

FEC ID number of contributing federal political committee. **C**

Name of Employer Salsbury Engineering Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03208

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ms. Josephine Saltzman

Mailing Address 3004 Minnetonka Drive

City State Zip Code
Cedar Falls IA 50613-1538

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03209

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ► **825.00**

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 1077 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Josephine Saltzman

Mailing Address 3004 Minnetonka Drive

City State Zip Code
Cedar Falls IA 50613-1538

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai03210

Amount of Each Receipt this Period
80.00

B. Full Name (Last, First, Middle Initial)
Mr. Walter A. Salvas

Mailing Address 833 Wolcott Avenue

City State Zip Code
Beacon NY 12508-4257

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03211

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Erasmus J. Salveti

Mailing Address 17103 67Th Avenue

City State Zip Code
Fresh Meadows NY 11365-2001

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai03212

Amount of Each Receipt this Period
200.00

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 1078 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert E. Sams

Mailing Address 300 E. 3Rd Street
Suite 1

City Atlantic State IA Zip Code 50022-1147

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai03213

Amount of Each Receipt this Period
55.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert E. Sams

Mailing Address 300 E. 3Rd Street
Suite 1

City Atlantic State IA Zip Code 50022-1147

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai03214

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael & Claudia H. Sander

Mailing Address 2702 S Westgate Dr

City Weslaco State TX Zip Code 78596-4068

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03215

Amount of Each Receipt this Period
250.00

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 1079 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David L. Sanders

Mailing Address 21543 Elm Hurst Lane

City State Zip Code
Katy TX 77450-5519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Unemployed Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai03216
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Kent B. Sanders

Mailing Address P.O. Box 31

City State Zip Code
Gunnison UT 84634-0031

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Telephone President / Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai03217
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Tammy Flynn Sanford

Mailing Address 15314 Philippine Street

City State Zip Code
Houston TX 77040-1347

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Premier Installations & Design Group Business Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 305.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03218
Amount of Each Receipt this Period: 305.00

SUBTOTAL of Receipts This Page (optional) ► 855.00

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 1080 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John M. Sansom

Mailing Address 9455 Pensacola Blvd.
Suite B.

City Pensacola State FL Zip Code 32534-1237

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03219

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Cynthia Santomarco

Mailing Address 49 Shadow Creek Circle

City Palos Heights State IL Zip Code 60463-3168

FEC ID number of contributing federal political committee. **C**

Name of Employer Concept Leasing Occupation Office Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 4 / 2 0 0 9

Transaction ID: 2009M04L11ai03220

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Manuel Santos

Mailing Address 289 Stevans Avenue

City Southamboy State NJ Zip Code 08879-2541

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai03221

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00

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 1081 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Manuel Santos

Mailing Address 289 Stevans Avenue

City State Zip Code
Southamboy NJ 08879-2541

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03222

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Dr. Don R. Santschi

Mailing Address 1922 Saint Clair Drive

City State Zip Code
Pekin IL 61554-6335

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03223

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Tom Sarmiento

Mailing Address 6767 Stanley Avenue

City State Zip Code
Carmichael CA 95608-3953

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai03224

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 1082 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. John T. Sasso		Date of Receipt	
	Mailing Address P.O. Box 577		M M / D D / Y Y Y Y Y 03 / 10 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03225
	Gwynedd Valley	PA	19437-0577	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

B.	Full Name (Last, First, Middle Initial) Miss Alice F. Saunders		Date of Receipt	
	Mailing Address 1 Skyline Drive Apartment 3410		M M / D D / Y Y Y Y Y 03 / 30 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03226
	Medford	OR	97504-2501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		500.00		

C.	Full Name (Last, First, Middle Initial) Mr. Joseph Saunders		Date of Receipt	
	Mailing Address 765 Market Street Apartment 24D		M M / D D / Y Y Y Y Y 03 / 26 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03227
	San Francisco	CA	94103-2037	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Fleet Financial		Occupation Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		3000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1800.00
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 1083 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George Saunderson

Mailing Address 208 N. Us Highway 1
Suite 2

City Tequesta State FL Zip Code 33469-2786

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03228

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Philip A Saur

Mailing Address 9890 Laubach Ave. Nw
P.O. Box 111

City Sparta State MI Zip Code 49345-0111

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Apple Grower, Real Estate Deve

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03229

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Edwin M. Savage

Mailing Address 1621 Gulf Blvd.
Apartment 1601

City Clearwater State FL Zip Code 33767-2966

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03230

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 1084 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Edwin M. Savage

Mailing Address 1621 Gulf Blvd.
Apartment 1601

City Clearwater State FL Zip Code 33767-2966

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03231

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Ms. La Rae T. Savage

Mailing Address 9093 Canyon Heights Drive

City Cedar Hills State UT Zip Code 84062-8779

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03232

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Gloria Saville

Mailing Address 700 Washington Street

City Cumberland State MD Zip Code 21502-2713

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03233

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 1085 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Daniel Sawicki

Mailing Address P.O. Box 1667

City Linden State NJ Zip Code 07036-0007

FEC ID number of contributing federal political committee. **C**

Name of Employer Wessex, L.L.C. Occupation Real Estate Investor/Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 248.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai03234
 Amount of Each Receipt this Period: 248.00

B. Full Name (Last, First, Middle Initial)
Mr. Marshall Sawyer

Mailing Address H. C. 32 Box 590

City Quemado State NM Zip Code 87829-9609

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 18 / 2009
Transaction ID: 2009M04L11ai03235
 Amount of Each Receipt this Period: 150.00

C. Full Name (Last, First, Middle Initial)
Mr. Anthony J. Scala

Mailing Address 4401 Theall Road

City Rye State NY Zip Code 10580-1480

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: 2009M04L11ai03236
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 898.00

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 1086 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Leslie Scales	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 2905 River Road Extended	Transaction ID: 2009M04L11ai03237
	City Greenwood State MS Zip Code 38930	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 450.00	

B.	Full Name (Last, First, Middle Initial) Mr. Gary Schaefer	Date of Receipt MM / DD / YYYY 03 / 04 / 2009
	Mailing Address P.O. Box 400	Transaction ID: 2009M04L11ai03238
	City Holliday State TX Zip Code 76366-0400	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. Nelson Schaenen, Jr.	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 56 Midwood Terrace	Transaction ID: 2009M04L11ai03239
	City Madison State NJ Zip Code 07940-2735	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

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 1087 / 1945
(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
							17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Elizabeth F. Schafer

Mailing Address 736 Crescent Road

City Jackson State MI Zip Code 49203-3965

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 06 / 2009

Transaction ID: 2009M04L11ai03240

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Ms. Susan Schalon

Mailing Address 5694 Forest Glen Drive S.E.

City Ada State MI Zip Code 49301-9111

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 03 / 16 / 2009

Transaction ID: 2009M04L11ai03241

Amount of Each Receipt this Period 225.00

C. Full Name (Last, First, Middle Initial)
Mr. Charles G. Schappert, Sr.

Mailing Address 1224 Forest Parkway
P.O. Box 479

City Paulsboro State NJ Zip Code 08066-0479

FEC ID number of contributing federal political committee. **C**

Name of Employer H.P.S., Inc. Occupation C.E.O.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 03 / 03 / 2009

Transaction ID: 2009M04L11ai03242

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► **1725.00**

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 1088 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Charles G. Schappert, Sr.	Date of Receipt MM / DD / YYYY 03 / 19 / 2009
	Mailing Address 1224 Forest Parkway P.O. Box 479	Transaction ID: 2009M04L11ai03243
	City Paulsboro State NJ Zip Code 08066-0479	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer H.P.S., Inc. Occupation C.E.O. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

B.	Full Name (Last, First, Middle Initial) Mr. Charles G. Schappert, Sr.	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 1224 Forest Parkway P.O. Box 479	Transaction ID: 2009M04L11ai03244
	City Paulsboro State NJ Zip Code 08066-0479	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer H.P.S., Inc. Occupation C.E.O. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Mr. Walter Edward Scheetz	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 218 Clapboard Ridge Road	Transaction ID: 2009M04L11ai03245
	City Greenwich State CT Zip Code 06831-3352	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer The Scheetz Group Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1089 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Missie Scheffman

Mailing Address 4226 E. Pontatoc Dr.

City State Zip Code
Tucson AZ 85718-6153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Genentech, USA Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai03246

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. David Scheibner

Mailing Address 7211 Tessa Lakes Ct.

City State Zip Code
Sugar Land TX 77479-5628

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
S.P.C. Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03247

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mr. Henry F. Scheig

Mailing Address 12600 N. Port Washington Road
Apartment 1311

City State Zip Code
Mequon WI 53092-3472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai03248

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

800.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1090 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Florence Z. Schell

Mailing Address 46 Plymouth Drive

City State Zip Code
Saco ME 04072-1734

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai03249

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Florence Z. Schell

Mailing Address 46 Plymouth Drive

City State Zip Code
Saco ME 04072-1734

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 2 / 2 0 0 9

Transaction ID: 2009M04L11ai03250

Amount of Each Receipt this Period

20.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Florence Z. Schell

Mailing Address 46 Plymouth Drive

City State Zip Code
Saco ME 04072-1734

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 215.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03251

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional)

80.00

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 1091 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Florence Z. Schell		Date of Receipt MM / DD / YYYY 03 / 24 / 2009		
	Mailing Address 46 Plymouth Drive		Transaction ID: 2009M04L11ai03252		
	City Saco	State ME	Zip Code 04072-1734	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.00			

B.	Full Name (Last, First, Middle Initial) Mr. Daniel Scherdt		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 2023 Alta Loma St		Transaction ID: 2009M04L11ai03253		
	City Davis	State CA	Zip Code 95616-0713	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer USAF	Occupation Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00			

C.	Full Name (Last, First, Middle Initial) Mr. George F. Scherer		Date of Receipt MM / DD / YYYY 03 / 10 / 2009		
	Mailing Address 606 Loughmor Pass		Transaction ID: 2009M04L11ai03254		
	City Saint Charles	State MO	Zip Code 63304-0504	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Mc Carthy Building Company	Occupation Chief Financial Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00			

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 1092 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Ms. Catharine H. Schieferstein

Mailing Address 1907 Bernville Road

City State Zip Code
 Reading PA 19601-1113

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2009

Transaction ID: 2009M04L11ai03255

Amount of Each Receipt this Period
 200.00

B. Full Name (Last, First, Middle Initial)
 Mr. Kurt A. Schiessel

Mailing Address 1755 W. Malvern Avenue
 Apartment 7

City State Zip Code
 Fullerton CA 92833-2440

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 410.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2009

Transaction ID: 2009M04L11ai03256

Amount of Each Receipt this Period
 110.00

C. Full Name (Last, First, Middle Initial)
 Dr. Gerrit Schipper

Mailing Address 2344 Dixon Road

City State Zip Code
 Frederick MD 21704-8131

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 09 / 2009

Transaction ID: 2009M04L11ai03257

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional) ► **560.00**

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 1093 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Larry C Schleinat

Mailing Address 2228 Hollyhill Drive

City State Zip Code
Denton TX 76205-8274

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Integrated Services, Inc. Information Technology Consult

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03258

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Ina I. Schlichtmann

Mailing Address 507 3Rd Street S.E.
Apartment 6

City State Zip Code
Hillsboro ND 58045-0448

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03259

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr. Gerald Schlieff

Mailing Address 5773 Woodway Drive
800

City State Zip Code
Houston TX 77057-1501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai03260

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 775.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1094 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Paul G. Schloemer

Mailing Address 7 Hermitage Lane

City State Zip Code
Newport Beach CA 92660-5213

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03261

Amount of Each Receipt this Period
220.00

B.

Full Name (Last, First, Middle Initial)
Mr. Andrew F. Schmidt

Mailing Address P.O. Box 1177

City State Zip Code
Gulf Breeze FL 32562-1177

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03262

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Andrew F. Schmidt

Mailing Address P.O. Box 1177

City State Zip Code
Gulf Breeze FL 32562-1177

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03263

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

420.00

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 1095 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Clemens Edward Schmidt

Mailing Address 1755 Cape Coral Parkway E.
Apartment 116

City State Zip Code
Cape Coral FL 33904-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai03264

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Gladys Schmidt

Mailing Address 3125 Smith Road
Apartment 616

City State Zip Code
Fairlawn OH 44333-2677

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai03265

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Linda A Schmidt

Mailing Address 443 Fox Ln

City State Zip Code
Fredericksburg TX 78624-7236

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai03266

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 1096 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Roger & Nancy Schmidt

Mailing Address 4903 Trailwood Drive

City Greensboro State NC Zip Code 27407-8241

FEC ID number of contributing federal political committee. **C**

Name of Employer Kflex, U. S. A. Occupation Technical Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai03267
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Stacey Schmidt

Mailing Address 21307 Promontory Circle

City San Antonio State TX Zip Code 78258-2551

FEC ID number of contributing federal political committee. **C**

Name of Employer Uthscsa/Ncb Hospital Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 03 / 2009
Transaction ID: 2009M04L11ai03268
 Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Theodore Schmidt

Mailing Address 2115 Connor Park Cove

City Salt Lake City State UT Zip Code 84109-2468

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: 2009M04L11ai03269
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1097 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Col. & Mrs William P. Schneider

Mailing Address 20484 Langley Drive

City State Zip Code
Sterling VA 20165-3569

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai03270

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Marilyn A. Schnuck

Mailing Address 131 Linden Avenue

City State Zip Code
Clayton MO 63105-3839

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03271

Amount of Each Receipt this Period
5000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ferd P. Schoedinger, Jr.

Mailing Address 387 N. Drexel Avenue

City State Zip Code
Columbus OH 43209-1007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03272

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

5800.00

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 1098 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Joan Schonholtz		Date of Receipt
	Mailing Address 32 Beman Woods Court		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 03 / 2009
	City	State	Zip Code
	Potomac	MD	20854-5481
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 2009M04L11ai03273
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 1250.00	

B.	Full Name (Last, First, Middle Initial) Ms. Lynn-Anne M. Schow		Date of Receipt
	Mailing Address 75 High Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 16 / 2009
	City	State	Zip Code
	Newburyport	MA	01950-3071
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 2009M04L11ai03274
Name of Employer Timmons Advisors		Occupation Lawyer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

C.	Full Name (Last, First, Middle Initial) Maj. Lawrence L. Schrank, U.S.A. (Re		Date of Receipt
	Mailing Address 7081 FM 932		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	Hamilton	TX	76531-3163
FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>	Transaction ID: 2009M04L11ai03275
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 350.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 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 1099 / 1945

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Maj. Lawrence L. Schrank, U.S.A. (Re

Mailing Address 7081 FM 932

City

Hamilton

State

TX

Zip Code

76531-3163

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai03276

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Maj. Lawrence L. Schrank, U.S.A. (Re

Mailing Address 7081 FM 932

City

Hamilton

State

TX

Zip Code

76531-3163

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai03277

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Terri Schraudenbach

Mailing Address 2545 Sugarloaf Club Drive

City

Duluth

State

GA

Zip Code

30097-7406

FEC ID number of contributing federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai03278

Amount of Each Receipt this Period

500.00

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 1100 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Mary Beth Schrenk

Mailing Address 430 Hackmann Lane

City State Zip Code
Creve Coeur MO 63141-6904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Eye Consultants Of St. Louis Administrative Assistant

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai03279

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. Kenneth Schroeder

Mailing Address 3500 Forest Edge Drive
#2C

City State Zip Code
Silver Spring MD 20906-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 251.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai03280

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

M J Schroeder

Mailing Address 3743 Georgetown

City State Zip Code
Houston TX 77005-2821

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ret. Ret.

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03281

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1101 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles W. Schudt

Mailing Address 900 N. Taylor Street
Apartment 1426

City Arlington State VA Zip Code 22203-1873

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 03 / 04 / 2009
Transaction ID: 2009M04L11ai03282
Amount of Each Receipt this Period 60.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles W. Schudt

Mailing Address 900 N. Taylor Street
Apartment 1426

City Arlington State VA Zip Code 22203-1873

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 355.00

Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai03283
Amount of Each Receipt this Period 110.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard E. Schue

Mailing Address 5271 Comanche Tr

City Carmel State IN Zip Code 46033-8852

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai03284
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ **420.00**

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 1102 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Margaret Schuh

Mailing Address 3348 Blossom Lane

City State Zip Code
North Tonawanda NY 14120-1272

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai03285

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mrs. Phyllis R. Schulke

Mailing Address 1963 Ocean Ridge Circle

City State Zip Code
Vero Beach FL 32963-2731

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai03286

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Roy Schulte

Mailing Address 56 Buttonball Lane

City State Zip Code
Madison CT 06443-2445

FEC ID number of contributing federal political committee. **C**

Name of Employer Gartner, Inc. Occupation Computer Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03287

Amount of Each Receipt this Period
150.00

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 1103 / 1945
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Roy Schulte	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 56 Buttonball Lane	Transaction ID: 2009M04L11ai03288
	City State Zip Code Madison CT 06443-2445	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Gartner, Inc.	Occupation Computer Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) Mr. Gary J. Schultz	Date of Receipt MM / DD / YYYY 03 / 04 / 2009
	Mailing Address 1108 W. Powderhorn Road	Transaction ID: 2009M04L11ai03289
	City State Zip Code Mechanicsburg PA 17050-2006	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Ms. Mary Barbara Schultz	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 50 Bow Air Center #200	Transaction ID: 2009M04L11ai03290
	City State Zip Code Greenbrae CA 94904-1939	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1104 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Russell D. Schultz

Mailing Address P.O. Box 380

City

Michigantown

State

IN

Zip Code

46057-0380

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-Employed

Occupation

Self-Employed

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03291

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

Mr. Russell D. Schultz

Mailing Address P.O. Box 380

City

Michigantown

State

IN

Zip Code

46057-0380

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-Employed

Occupation

Self-Employed

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03292

Amount of Each Receipt this Period

180.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Yvonne Schultz

Mailing Address 420 Lincoln Avenue

City

Minot

State

ND

Zip Code

58703-2216

FEC ID number of contributing federal political committee.

C

Name of Employer
Retired

Occupation

Retired

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai03293

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) ▶

880.00

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 1105 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Harry Richard Schumacher

Mailing Address 47 E. 88Th Street
Apartment 14A

City State Zip Code
New York NY 10128-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03294

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Harry Richard Schumacher

Mailing Address 47 E. 88Th Street
Apartment 14A

City State Zip Code
New York NY 10128-1152

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai03295

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Christa Schutz

Mailing Address 1 Renaissance Square
Unit 16E

City State Zip Code
White Plains NY 10601-3030

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03296

Amount of Each Receipt this Period
100.00

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: (check only one)	PAGE 1106 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Richard W. Schuur	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 13120 Nimrod Place	Transaction ID: 2009M04L11ai03297
	City State Zip Code Los Angeles CA 90049-3633	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. A. Duane Schwartz	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 204 Clydesdale Trace	Transaction ID: 2009M04L11ai03298
	City State Zip Code Louisville KY 40223-3376	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) Ms. Lydia Ann Schwartz	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address P.O. Box 1524	Transaction ID: 2009M04L11ai03299
	City State Zip Code Sedona AZ 86339-6633	Amount of Each Receipt this Period 110.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	▶	285.00
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 1107 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Madeleine Y. Schwartz

Mailing Address 8440 Beacon Hill Road

City State Zip Code
Cincinnati OH 45243-4202

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03300

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Pamela Schwer

Mailing Address P.O. Box 127

City State Zip Code
Kingwood WV 26537-0127

FEC ID number of contributing federal political committee. **C**

Name of Employer Maloney & Associates, P.L.-L.C. Occupation Certified Public Accountant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai03301

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. C. Ron Schwisow

Mailing Address 806 Palomino

City State Zip Code
Midland TX 79705-1811

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03302

Amount of Each Receipt this Period
300.00

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 1108 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Thomas L. Scoopmire
Mailing Address P.O. Box 30243

City State Zip Code
Greenville NC 27833-0243

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03303

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Thomas L. Scoopmire
Mailing Address P.O. Box 30243

City State Zip Code
Greenville NC 27833-0243

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03304

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Hon Gerald W. Scott
Mailing Address P.O. Box 4915

City State Zip Code
Buena Vista CO 81211-4915

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03305

Amount of Each Receipt this Period
150.00

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 1109 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Maymo Scott

Mailing Address P.O. Box 434

City State Zip Code
Centerville UT 84014-1335

FEC ID number of contributing federal political committee. **C**

Name of Employer Library Occupation Process Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai03306

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
Mrs. Maymo Scott

Mailing Address P.O. Box 434

City State Zip Code
Centerville UT 84014-1335

FEC ID number of contributing federal political committee. **C**

Name of Employer Library Occupation Process Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03307

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Mrs. Maymo Scott

Mailing Address P.O. Box 434

City State Zip Code
Centerville UT 84014-1335

FEC ID number of contributing federal political committee. **C**

Name of Employer Library Occupation Process Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03308

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 80.00

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 1110 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Maymo Scott

Mailing Address P.O. Box 434

City State Zip Code
Centerville UT 84014-1335

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Library Process Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03309

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
Mr. John A. Scotti

Mailing Address 2180 Clairmont Drive

City State Zip Code
Pittsburgh PA 15241-3246

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai03310

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Ray Screbant

Mailing Address 81 Bell Canyon Road

City State Zip Code
Bell Canyon CA 91307-1104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03311

Amount of Each Receipt this Period
275.00

SUBTOTAL of Receipts This Page (optional) ► **555.00**

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 1111 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Gerald Charles Scullin	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 3461 Loadstone Dr.	Transaction ID: 2009M04L11ai03312
	City State Zip Code Sherman Oaks CA 91403-4513	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Delphi Business Properties, Inc. Occupation: Real Estate Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. William P. Scully	Date of Receipt MM / DD / YYYY 03 / 13 / 2009
	Mailing Address 771 Manatee Cove	Transaction ID: 2009M04L11ai03313
	City State Zip Code Vero Beach FL 32963-3730	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 3000.00	

C.	Full Name (Last, First, Middle Initial) Dick & Carolyn Seaberg	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 1424 Via Zumaya	Transaction ID: 2009M04L11ai03314
	City State Zip Code Palos Verdes Estat CA 90274-2824	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	2150.00
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 1112 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert A. Seale, Jr.
Mailing Address 6627 Wanita Place

City Houston	State TX	Zip Code 77007-2034
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Liskow & Lewis	Occupation Attorney
------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai03315
 Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. W. H. Seaman
Mailing Address 7328 Forbes Avenue

City Van Nuys	State CA	Zip Code 91406-2737
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai03316
 Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Daniel Segina
Mailing Address 303 Lansing Island Drive

City Satellite Beach	State FL	Zip Code 32937-5106
-------------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Health First	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
03 / 12 / 2009

Transaction ID: 2009M04L11ai03317
 Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	1800.00
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 1113 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Richard M. Seibert

Mailing Address 919 Sunnyside Avenue

City State Zip Code
Reading PA 19610-2245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03318

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Richard M. Seibert

Mailing Address 919 Sunnyside Avenue

City State Zip Code
Reading PA 19610-2245

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai03319

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Arnold J. Seidule

Mailing Address 410 Oak Drive

City State Zip Code
Lake Jackson TX 77566-4217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai03320

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

2050.00

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 1114 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Harry J. Sellers

Mailing Address 3613 Cromwell Drive

City State Zip Code
Hephzibah GA 30815-6210

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai03321
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Chris Seltsam

Mailing Address 2004 Blackhorse Ln.

City State Zip Code
Lexington KY 40503-3708

FEC ID number of contributing federal political committee. **C**

Name of Employer Cmt Pizza Partners Occupation Restaurant Mgr

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai03322
Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
Mr. Joseph Thomas Semler

Mailing Address 4104 Rolling Knolls Drive

City State Zip Code
Allen TX 75002-2752

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai03323
Amount of Each Receipt this Period: 500.00

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 1115 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. F. Joseph Sensenbrenner

Mailing Address 1537 Lyon Drive
Apartment A5

City Neenah State WI Zip Code 54956-4274

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 6000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03324

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Ms. Gail F. Sermersheim

Mailing Address 5130 Falcon Chase Lane

City Atlanta State GA Zip Code 30342-2154

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03325

Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial)
Mr. Scott Serovy

Mailing Address 9415 E. Hillery Way

City Scottsdale State AZ Zip Code 85260-2017

FEC ID number of contributing federal political committee. **C**

Name of Employer Nestle, U. S. A. Occupation Sales Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03326

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1475.00

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 1116 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Scott Serovy

Mailing Address 9415 E. Hillery Way

City State Zip Code
Scottsdale AZ 85260-2017

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Nestle, U. S. A. Sales Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03327

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Kathleen Servidea

Mailing Address 14 Point O'Woods Road South

City State Zip Code
Darien CT 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Partnerre Capital Markets Corp Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03328

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Ray Settle

Mailing Address 111 Industry Pkwy.

City State Zip Code
Nicholasville KY 40356-9114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03329

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **875.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1117 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kevin Severson

Mailing Address 330 Marshall Street
Suite 1420

City Shreveport State LA Zip Code 71101-3016

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03330

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. James Sewell

Mailing Address 220 Little Harpe Trail

City Slatillo State MS Zip Code 38866-9533

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03331

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Ranah Seyda

Mailing Address 821 Virginia Dr.

City Orlando State FL Zip Code 32819

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Interior Designer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03332

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 950.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1118 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Mildred L. Seyler		Date of Receipt
	Mailing Address 37 Church Street Apartment 11		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 11 / 2009
	City State Zip Code Port Allegany PA 16743-1165		Transaction ID: 2009M04L11ai03333
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
	Name of Employer Retired Occupation Retired		<input type="text"/> 150.00
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date <input type="text"/> 300.00		

B.	Full Name (Last, First, Middle Initial) Ms. Mildred L. Seyler		Date of Receipt
	Mailing Address 37 Church Street Apartment 11		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City State Zip Code Port Allegany PA 16743-1165		Transaction ID: 2009M04L11ai03334
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
	Name of Employer Retired Occupation Retired		<input type="text"/> 50.00
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date <input type="text"/> 300.00		

C.	Full Name (Last, First, Middle Initial) Kirk Shadrick		Date of Receipt
	Mailing Address 1510 Detwiler Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 04 / 2009
	City State Zip Code York PA 17404		Transaction ID: 2009M04L11ai03335
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
	Name of Employer U.S. Government Occupation Coast Guard		<input type="text"/> 50.00
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date <input type="text"/> 370.00		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 250.00
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 1119 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Kirk Shadrick

Mailing Address 1510 Detwiler Drive

City State Zip Code
York PA 17404

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S. Government Occupation Coast Guard

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai03336

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steven R. Shallenberger

Mailing Address 1330 South 1000 East

City State Zip Code
Orem UT 84097-7260

FEC ID number of contributing federal political committee. **C**

Name of Employer American Synergy Corporation Occupation Businessman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03337

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Eileen D. Shamel

Mailing Address 4915 Yapple Avenue

City State Zip Code
Santa Barbara CA 93111-1533

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03338

Amount of Each Receipt this Period
210.00

SUBTOTAL of Receipts This Page (optional) ► **1310.00**

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 1120 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert Michael Shanahan
Mailing Address 74265 Desert Rose Lane
City Indian Wells State CA Zip Code 92210-7376
FEC ID number of contributing federal political committee. **C**
Name of Employer The Capital Group, Inc. Occupation Finance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6000.00
Date of Receipt 03 / 06 / 2009
Transaction ID: 2009M04L11ai03339
Amount of Each Receipt this Period 2000.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert Michael Shanahan
Mailing Address 74265 Desert Rose Lane
City Indian Wells State CA Zip Code 92210-7376
FEC ID number of contributing federal political committee. **C**
Name of Employer The Capital Group, Inc. Occupation Finance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 6000.00
Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai03340
Amount of Each Receipt this Period 4000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Bernice R. Shanklin
Mailing Address 249 Antiqua Way
City Niceville State FL Zip Code 32578-4002
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai03341
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 6250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1121 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert W. Sharp	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 2 Gittings Avenue	Transaction ID: 2009M04L11ai03342
	City State Zip Code Baltimore MD 21212-2418	Amount of Each Receipt this Period 1.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 216.00	

B.	Full Name (Last, First, Middle Initial) Ms. Jacqueline L. Sharwell	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 171 Devon Road	Transaction ID: 2009M04L11ai03343
	City State Zip Code Bronxville NY 10708-5700	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. George H. Shattuck, Jr.	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 7897 S.E. Loblolly Bay Drive	Transaction ID: 2009M04L11ai03344
	City State Zip Code Hobe Sound FL 33455-3832	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	151.00
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 1122 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. George H. Shattuck, Jr.

Mailing Address 7897 S.E. Loblolly Bay Drive

City State Zip Code
Hobe Sound FL 33455-3832

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai03345

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. R. S. Shawell

Mailing Address 4915 Post Oak Timber Drive

City State Zip Code
Houston TX 77056-2211

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai03346

Amount of Each Receipt this Period
275.00

C.

Full Name (Last, First, Middle Initial)
Mr. James J. Shea, Jr.

Mailing Address 70168 Sonora Rd

City State Zip Code
Rancho Mirage CA 92270-3431

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai03347

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

725.00

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 1123 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert F. Shea

Mailing Address 4514 Woods End
P. O. Box 44284

City State Zip Code
Madison WI 53711-1420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2009

Transaction ID: 2009M04L11ai03348

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert F. Shea

Mailing Address 4514 Woods End
P. O. Box 44284

City State Zip Code
Madison WI 53711-1420

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 355.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai03349

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Dr. Stephen H. Shealy

Mailing Address 2910 Fairway View Ct.

City State Zip Code
Castle Rock CO 80108-8318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Diversified Radiology Physician

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai03350

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)

405.00

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 1124 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William J. Sheehan, Jr.

Mailing Address 27 Elm Drive

City State Zip Code
New Hyde Park NY 11040-3348

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H.S.B.C. Tax Preparer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03351

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Dr. Vernon Sheen

Mailing Address 3289 Mulberry Street

City State Zip Code
Edgewater MD 21037-1623

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai03352

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Riley C. Shelnett

Mailing Address 1400 Ruckel Drive

City State Zip Code
Niceville FL 32578-1617

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Textron Systems Program Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03353

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 2400.00

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 1125 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles Shelton

Mailing Address 4658 Carlton Dunes Drive

City State Zip Code
Fernandina Beach FL 32034-5590

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03354

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. George P. Shelton, III

Mailing Address 4124 Kingsferry Drive

City State Zip Code
Arlington TX 76016-3636

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai03355

Amount of Each Receipt this Period
220.00

C. Full Name (Last, First, Middle Initial)
Ms. Sharon M. Shelton

Mailing Address 11713 Crossdale Avenue

City State Zip Code
Norwalk CA 90650-7710

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03356

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **770.00**

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 1126 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Mark R. Shenkman		Date of Receipt	
	Mailing Address 1 Gaston Farm Road		M M / D D / Y Y Y Y Y 03 / 02 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03357
	Greenwich	CT	06831-2711	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer Shenkman Capital Management, Inc.		Occupation Portfolio Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

B.	Full Name (Last, First, Middle Initial) Col. & Mrs William E. Sherman		Date of Receipt	
	Mailing Address 4269 Wiltshire Place		M M / D D / Y Y Y Y Y 03 / 11 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03358
	Dumfries	VA	22025-3148	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer U.S. Department Of Defense		Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		650.00		

C.	Full Name (Last, First, Middle Initial) Ms. Linda I. Sherwin		Date of Receipt	
	Mailing Address 2523 Elite Terrace		M M / D D / Y Y Y Y Y 03 / 26 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03359
	Colorado Springs	CO	80920-3857	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer Lockheed Martin		Occupation Training and Development Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		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 1127 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Sherwood

Mailing Address 1380 Calle Pequeno

City State Zip Code
Gardnerville NV 89410-6612

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03360

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Ms. Elizabeth A. Sherwood

Mailing Address 1380 Calle Pequeno

City State Zip Code
Gardnerville NV 89410-6612

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03361

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Dae Y. Shin

Mailing Address 5823 Bowen Daniel Drive

City State Zip Code
Tampa FL 33616-5651

FEC ID number of contributing federal political committee. **C**

Name of Employer Dae Shin Enterprises, Inc. Occupation C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai03362

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **2400.00**

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 1128 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Stacey L. Shindelar	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 1732 S. Congress Avenue #193	Transaction ID: 2009M04L11ai03363
	City State Zip Code Palm Springs FL 33461-2140	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Dept. Housing & Urban Development Occupation: Mortgage Banking Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Keith H Shinohara	Date of Receipt MM / DD / YYYY 03 / 13 / 2009
	Mailing Address 2-12-6-201 Shoto	Transaction ID: 2009M04L11ai03364
	City State Zip Code Shibuya-Ku, Tokyo ZZ 00000	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Citigroup Occupation: Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. John L. Shipman	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 2176 Ter Van Court NE	Transaction ID: 2009M04L11ai03365
	City State Zip Code Grand Rapids MI 49505-6330	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

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 1129 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. John L. Shipman

Mailing Address 2176 Ter Van Court NE

City State Zip Code
Grand Rapids MI 49505-6330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai03366

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Brian K. Shipp

Mailing Address 1325 Holly Springs Road

City State Zip Code
Rockmart GA 30153-6428

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Aiken Grading V.P.

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03367

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Louis E. Shirley

Mailing Address 1359 Central Avenue

City State Zip Code
East Point GA 30344-4946

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Newell Recycling, L.L.C. Executive

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai03368

Amount of Each Receipt this Period
500.00

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 1130 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Richard F. Shonk

Mailing Address 7440 Wood Meadow Dr.

City State Zip Code
Cincinnati OH 45243-3073

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United Healthcare Medical Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03369

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. William L. Shores

Mailing Address 3334 Horseshoe Bend Court

City State Zip Code
Longwood FL 32779-3135

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Shores, Tagman & Company, Pa C.P.A.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai03370

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. James M. Shoup

Mailing Address 3481 Woodstone Drive

City State Zip Code
Lewis Center OH 43035-9386

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03371

Amount of Each Receipt this Period
600.00

SUBTOTAL of Receipts This Page (optional) ► 1350.00

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 1131 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard L. Showalter

Mailing Address 8016 S. Villa Avenue

City State Zip Code
Oklahoma City OK 73159-4825

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03372

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert H. Shrader

Mailing Address 9333 Rolling Circle

City State Zip Code
San Antonio FL 33576-4651

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03373

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Dr. Sandy Shultz

Mailing Address 1700 Flagler Avenue

City State Zip Code
Key West FL 33040-4944

FEC ID number of contributing federal political committee. **C**

Name of Employer Chatham Radiologist, P. A. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03374

Amount of Each Receipt this Period
150.00

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 1132 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David Shumway

Mailing Address 1450 36Th Avenue S.E.

City State Zip Code
Norman OK 73026-4726

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03375

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Dr. & Mrs. Steve Shy

Mailing Address 3174 Route 75

City State Zip Code
Huntington WV 25704-9150

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai03376

Amount of Each Receipt this Period
1125.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. James Sidell

Mailing Address 17809 Meeting House Road

City State Zip Code
Sandy Spring MD 20860-1022

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai03377

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1375.00**

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 1133 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. James Sidell

Mailing Address 17809 Meeting House Road

City State Zip Code
Sandy Spring MD 20860-1022

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 0 9

Transaction ID: 2009M04L11ai03378

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Herbert J. Siegel

Mailing Address 190 E. 72Nd Street
Apartment 28D

City State Zip Code
New York NY 10021-4370

FEC ID number of contributing federal political committee. **C**

Name of Employer News America, Inc. Occupation Executive

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai03379

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard Siegel

Mailing Address 201 Russett Road

City State Zip Code
Chestnut Hill MA 02467-3625

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai03380

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

1100.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1134 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Louis W. Siegrist, Jr.	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 4052 Avonwood Avenue	Transaction ID: 2009M04L11ai03381
	City State Zip Code Las Vegas NV 89121-4504	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Vernon Erwin Sieling	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 34405 Port Superior Road	Transaction ID: 2009M04L11ai03382
	City State Zip Code Bayfield WI 54814-3500	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Mr. Vernon Erwin Sieling	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 34405 Port Superior Road	Transaction ID: 2009M04L11ai03383
	City State Zip Code Bayfield WI 54814-3500	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1135 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Michael J. Sigler

Mailing Address 360 S. Arroyo Blvd

City Pasadena State CA Zip Code 91105-1405

FEC ID number of contributing federal political committee. **C**

Name of Employer Amgen Occupation Sales Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai03384
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. John Silliman

Mailing Address 16 Jardine Lane

City Lincoln Park State NJ Zip Code 07035-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai03385
 Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. John Silliman

Mailing Address 16 Jardine Lane

City Lincoln Park State NJ Zip Code 07035-1519

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai03386
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1136 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Brett Silver		Date of Receipt	
	Mailing Address 19 Great Hills		M M / D D / Y Y Y Y Y 03 / 10 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03387
	New Hope	PA	18938-9283	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Ncb Management Services, Inc		Occupation Financial Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1000.00		

B.	Full Name (Last, First, Middle Initial) Mr. Erron Silverstein		Date of Receipt	
	Mailing Address 8979 Norma Place		M M / D D / Y Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03388
	West Hollywood	CA	90069-4818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Self		Occupation Software Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

C.	Full Name (Last, First, Middle Initial) Mr. Joseph L. Simek		Date of Receipt	
	Mailing Address 123 W. State Street Suite 6		M M / D D / Y Y Y Y Y 03 / 11 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03389
	Medford	WI	54451-0467	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1137 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David M. Simmons

Mailing Address 2761 Knollwood Drive

City State Zip Code
Montgomery AL 36116-3816

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03390

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Mr. David M. Simmons

Mailing Address 2761 Knollwood Drive

City State Zip Code
Montgomery AL 36116-3816

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03391

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Mr. Spike Simmons

Mailing Address 154 W. Buffalo Street

City State Zip Code
Holbrook AZ 86025-2838

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai03392

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **330.00**

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 1138 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William Simmons

Mailing Address 6636 Dogwood Creek Drive

City Austin State TX Zip Code 78746-1318

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 05 / 2009
Transaction ID: 2009M04L11ai03393
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Gregory S. Simms

Mailing Address 7337 Holiday Road S.

City Jacksonville State FL Zip Code 32216-3241

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai03394
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael Simon

Mailing Address 1601 Banks St

City Houston State TX Zip Code 77006-6021

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai03395
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1139 / 1945
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Michael S. Simon		Date of Receipt
	Mailing Address 75 Prospect Street Apartment 2B		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 02 / 2009
	City	State	Zip Code
	East Orange	NJ	07017-2336
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03396
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 278.24

B.	Full Name (Last, First, Middle Initial) Mr. Mitchell Simons		Date of Receipt
	Mailing Address 81 Sweetbriar Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	Fort Thomas	KY	41075-1620
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03397
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 1500.00

C.	Full Name (Last, First, Middle Initial) Mr. Ronald Simons		Date of Receipt
	Mailing Address 4583 W. 1100 N.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 12 / 2009
	City	State	Zip Code
	Idaville	IN	47950-7904
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03398
Name of Employer Willie Motes Auto Recycling		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 400.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2178.24
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 1140 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Michael A. Simpson

Mailing Address 1318 Montgomery Ln

City State Zip Code
Southlake TX 76092-9600

FEC ID number of contributing federal political committee. **C**

Name of Employer Michael A Simpson & Associates
Occupation Insurance Broker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03399

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Mr. S. Frank Simpson

Mailing Address 2170 Cascading Creek Court

City State Zip Code
Cumming GA 30041-7696

FEC ID number of contributing federal political committee. **C**

Name of Employer Int. Gourmet Pro., Inc.
Occupation C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03400

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Wayne L. Simpson

Mailing Address 8716 Glenmora Drive

City State Zip Code
Shreveport LA 71106-6233

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired
Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
520.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03401

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ▶ **795.00**

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 1141 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. William H. Simpson

Mailing Address 2532 Hepplewhite Drive

City York State PA Zip Code 17404-1216

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03402

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. William H. Simpson

Mailing Address P.O. Box 2026

City York State PA Zip Code 17405-2026

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03403

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Gordon B. Sims, Jr.

Mailing Address 304 Sims Ln.

City Luray State VA Zip Code 22835-7141

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03404

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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 1142 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Barbara J. Singleton

Mailing Address 2601 Marsh Lane
Unit 331

City State Zip Code
Plano TX 75093-8462

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai03405

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Edward E. Singleton

Mailing Address 811 Carpenter Drive

City State Zip Code
Hollister CA 95023-9385

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 440.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai03406

Amount of Each Receipt this Period
440.00

C.

Full Name (Last, First, Middle Initial)
Mr. James M. Sink

Mailing Address P.O. Box 925

City State Zip Code
Bellaire TX 77402-0925

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai03407

Amount of Each Receipt this Period
110.00

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 1143 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Jimmy O. Sio

Mailing Address 8604 Dinard Place

City State Zip Code
Bakersfield CA 93311-2136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai03408

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Oldrich Sipal

Mailing Address 12919 East Corrine Drive

City State Zip Code
Scottsdale AZ 85259-3554

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03409

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael Siwierka

Mailing Address 5507 Deerbourne Chase Drive

City State Zip Code
Sugar Land TX 77479-4194

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Perdue Brandon Fielder Co-llins Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03410

Amount of Each Receipt this Period
100.00

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 1144 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Johann Skaptason

Mailing Address 15567 Floyd Lane

City State Zip Code
Overland Park KS 66223-3288

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Ret.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03411

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Dr. Billy K. Skelly

Mailing Address 3780 W. 26th St.

City State Zip Code
Joplin MO 64804-0137

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai03412

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Neusa J. Skeoch

Mailing Address 6857 Elaine Way

City State Zip Code
San Diego CA 92120-3932

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03413

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶

600.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1145 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Damir S. Skerl	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 702 Last Arrow Drive	Transaction ID: 2009M04L11ai03414
	City State Zip Code Houston TX 77079-4205	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ms. Patricia Ann Skok	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 3 Spindrift Court Apartment 8	Transaction ID: 2009M04L11ai03415
	City State Zip Code Buffalo NY 14221-7832	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert A. Skotnicki	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 4729 Rock Ledge Drive	Transaction ID: 2009M04L11ai03416
	City State Zip Code Harrisburg PA 17110-3255	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Associated Cardiologists Occupation Cardiologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 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: PAGE 1146 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Timothy Skrobot

Mailing Address 1001 Crossings Drive

City State Zip Code
Lithia Springs GA 30122-3900

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Zaxby's Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03417

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles J. Skuba

Mailing Address 3913 Hillandale Court N.W.

City State Zip Code
Washington DC 20007-3947

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. Government International Trade

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03418

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
Mr. John Slaney

Mailing Address 745 W. Sunset Dr.

City State Zip Code
Redlands CA 92373-6937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03419

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **1025.00**

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 1147 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Joan E. Slattery		Date of Receipt																					
	Mailing Address 21955 Minnetonka Blvd. Apartment 5		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		3	0		2	0	0	9														
	City Greenwood State MN Zip Code 55331-5601		Transaction ID: 2009M04L11ai03420																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		500.00																						

B.	Full Name (Last, First, Middle Initial) Mr. Ronald Slattery		Date of Receipt																					
	Mailing Address 2-11-5 Azabu Juban, Room #902		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	7		2	0	0	9														
	City Minato-Ku, Tokyo State ZZ Zip Code 00000		Transaction ID: 2009M04L11ai03421																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		250.00																						

C.	Full Name (Last, First, Middle Initial) Mr. Jim Slaughaupt		Date of Receipt																					
	Mailing Address P.O. Box 909		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	6		2	0	0	9														
	City Chelan State WA Zip Code 98816-0909		Transaction ID: 2009M04L11ai03422																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Slaughaupt Agency Occupation Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00		220.00																						

SUBTOTAL of Receipts This Page (optional)	▶	970.00
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 1148 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Mitchell Slayton

Mailing Address 1383 Yacht Club Road

City State Zip Code
Hartwell GA 30643-8028

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai03423

Amount of Each Receipt this Period
220.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Shirley M. Sleichter

Mailing Address 808 Hartz Court

City State Zip Code
La Claire IA 52753-9214

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03424

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Barry J. Small

Mailing Address 1038 Ponus Ridge Road

City State Zip Code
New Canaan CT 06840

FEC ID number of contributing federal political committee. **C**

Name of Employer Weeden & Co. Occupation Investments

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03425

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1320.00**

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 1149 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Lynn Smelt

Mailing Address 3305 W. Kirby Street

City Tampa State FL Zip Code 33614-3364

FEC ID number of contributing federal political committee. **C**

Name of Employer Invest Financial Coporati-on Occupation Evp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai03426

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Lynn Smelt

Mailing Address 3305 W. Kirby Street

City Tampa State FL Zip Code 33614-3364

FEC ID number of contributing federal political committee. **C**

Name of Employer Invest Financial Coporati-on Occupation Evp

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 0 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03427

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Ms. Wanda F. Smiddy

Mailing Address 9371 Vaughn Ln.

City Franklin State OH Zip Code 45005-1434

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai03428

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: (check only one)	PAGE 1150 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Blaine H. Smith, Jr.		Date of Receipt	
	Mailing Address 4250 N. 5Th Street		M M / D D / Y Y Y Y Y 03 / 18 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03429
	Duncan	OK	73533-5536	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Ascog		Occupation Administrator		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

B.	Full Name (Last, First, Middle Initial) Mrs. Cheryl A Smith		Date of Receipt	
	Mailing Address 3325 S Mariana Cir		M M / D D / Y Y Y Y Y 03 / 03 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03430
	Tempe	AZ	85282-5555	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Requested		Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

C.	Full Name (Last, First, Middle Initial) Mr. Clarence Smith		Date of Receipt	
	Mailing Address 504 Fairview Parkway		M M / D D / Y Y Y Y Y 03 / 16 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03431
	Lafayette	LA	70508-6334	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		120.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		240.00		

SUBTOTAL of Receipts This Page (optional)	▶	620.00
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 1151 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Clifton L. Smith	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 3370 Longer Road	Transaction ID: 2009M04L11ai03432
	City Greensboro State GA Zip Code 30642-9618	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Daniel R. Smith	Date of Receipt MM / DD / YYYY 03 / 13 / 2009
	Mailing Address 3056 Shoal Creek Village Drive	Transaction ID: 2009M04L11ai03433
	City Lakeland State FL Zip Code 33803-5424	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. David Smith	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 2412 Woodwinds Ln.	Transaction ID: 2009M04L11ai03434
	City Wayzata State MN Zip Code 55391-9409	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1152 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
David L. Smith

Mailing Address 2442 Patagonia Way

City State Zip Code
Anthem AZ 85086-2366

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pulte Homes Land Development Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03435

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Doris S. Smith

Mailing Address 625 27 1/2 Road
Unit 107

City State Zip Code
Grand Junction CO 81506-5102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03436

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Earl W. Smith

Mailing Address 2700 E. Jacaranda Road

City State Zip Code
Palm Springs CA 92264-4845

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03437

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 1153 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. F. Randall Smith

Mailing Address 325 E. 53Rd St #3

City State Zip Code
New York NY 10022-3228

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Capital Counsel, L.L.C. President/Investment Advisor

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	9

Transaction ID: 2009M04L11ai03438

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Goodhue Smith

Mailing Address 5400 Bosque Blvd.
Suite 250

City State Zip Code
Waco TX 76710-4480

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	9

Transaction ID: 2009M04L11ai03439

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Hunter Smith

Mailing Address 1160 Tennis Road

City State Zip Code
Charlottesville VA 22901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	0	9

Transaction ID: 2009M04L11ai03440

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶

1800.00

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 1154 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James A. Smith

Mailing Address 2562 Treasure Drive
Apartment S4102

City Santa Barbara State CA Zip Code 93105-4104

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai03441
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. James F. Smith

Mailing Address 5 Byron Nelson

City San Antonio State TX Zip Code 78257-1726

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai03442
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. John B. Smith

Mailing Address 156 Parrish Loop

City Montross State VA Zip Code 22520-4127

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai03443
Amount of Each Receipt this Period 50.00

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 1155 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. John B. Smith

Mailing Address 156 Parrish Loop

City State Zip Code
Montross VA 22520-4127

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai03444

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Dr. John J Smith

Mailing Address 1510 N Colonial Ct

City State Zip Code
Arlington VA 22209-1439

FEC ID number of contributing federal political committee. **C**

Name of Employer Hogan & Hartson Llp Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03445

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Johnny Smith

Mailing Address 140 Guilford Lane

City State Zip Code
Prattville AL 36066-5128

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03446

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1156 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Keith Smith

Mailing Address 2929 Blackwood Road

City State Zip Code
Decatur GA 30033-1011

FEC ID number of contributing federal political committee. **C**

Name of Employer First Capital Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai03447

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Lawrence Smith

Mailing Address 2840 N.W. 35Th Avenue

City State Zip Code
Portland OR 97210-1568

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03448

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Lloyd Smith

Mailing Address 1312 W. Grand Avenue

City State Zip Code
Port Washington WI 53074-2042

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03449

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1157 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Mark A.H. Smith, Jr.
Mailing Address P.O. Box 100

City Linden State VA Zip Code 22642-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03450
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Max Smith
Mailing Address 3375 S. El Dorado

City Lakeway State TX Zip Code 78734-5231

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03451
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Merrill G. Smith
Mailing Address 7420 Country Commons Lane

City Sylvania State OH Zip Code 43560-2965

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai03452
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 1158 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Michael David Smith

Mailing Address 8453 Greenside Drive

City State Zip Code
Dublin OH 43017-8462

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Textron Marketing

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03453

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Paul Smith

Mailing Address 2650 Pacific Heights Road

City State Zip Code
Honolulu HI 96813-1049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai03454

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Paul Francis Smith

Mailing Address 360 Kilmarnock Place

City State Zip Code
Melbourne FL 32940-1875

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai03455

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

550.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 1159 / 1945
<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert A. Smith		Date of Receipt
	Mailing Address 4715 Garden Ranch Drive Apartment N207		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	Colorado Springs	CO	80918-6503
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03456
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Northrop Grumman		Occupation Engineer	<input type="text"/> 18.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 212.00	

B.	Full Name (Last, First, Middle Initial) Mr. Robert A. Smith		Date of Receipt
	Mailing Address 4715 Garden Ranch Drive Apartment N207		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Colorado Springs	CO	80918-6503
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03457
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Northrop Grumman		Occupation Engineer	<input type="text"/> 21.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 212.00	

C.	Full Name (Last, First, Middle Initial) Mr. Rodney D. Smith		Date of Receipt
	Mailing Address 4207 170th Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	Lakota	IA	50451-7009
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03458
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer Self Employed		Occupation Farmer	<input type="text"/> 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 139.00
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 1160 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Rodney D. Smith

Mailing Address 4207 170th Avenue

City State Zip Code
Lakota IA 50451-7009

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 ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03459

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Roger H. Smith

Mailing Address 1313 Stagecoach Rd Se

City State Zip Code
Albuquerque NM 87123-4320

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03460

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Ruth E. Smith

Mailing Address 604 W. Stoughton Street
Apartment 12

City State Zip Code
Urbana IL 61801-8807

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03461

Amount of Each Receipt this Period
300.00

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 1161 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Ruth R. Smith

Mailing Address 237 Camp Street
P.O. Box 384

City Barre State VT Zip Code 05641-3205

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03462

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Colonel Sherman A. Smith

Mailing Address 3890 Noble Drive
Apartment 1704

City San Diego State CA Zip Code 92122-5784

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed Occupation Self Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 1 1 / 2 0 0 9

Transaction ID: 2009M04L11ai03463

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Steven & Lorra J. Smith

Mailing Address 11402 S. 69Th East Ave.

City Bixby State OK Zip Code 74008-8239

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai03464

Amount of Each Receipt this Period
200.00

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 1162 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Thomas Smith		Date of Receipt
	Mailing Address P.O. Box 844		<input type="text" value="03"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77001-0844
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai03465
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

B.	Full Name (Last, First, Middle Initial) Mrs. Vianne Smith		Date of Receipt
	Mailing Address 4800 Canoe Creek Road		<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Saint Cloud	FL	34772-7442
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Soksod Company, Inc.		Occupation Vice President	Transaction ID: 2009M04L11ai03466
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Mrs. Vianne Smith		Date of Receipt
	Mailing Address 4800 Canoe Creek Road		<input type="text" value="03"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Saint Cloud	FL	34772-7442
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Soksod Company, Inc.		Occupation Vice President	Transaction ID: 2009M04L11ai03467
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="50.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1300.00"/>
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 1163 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William A Smith

Mailing Address 2320 West Butler St.

City State Zip Code
Leesburg FL 34748-5402

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03468

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. William D. Smith

Mailing Address 4833 West 96Th Street

City State Zip Code
Bloomington MN 55437-2062

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03469

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Barbara Snelling

Mailing Address 4092 Harbor Road

City State Zip Code
Shelburne VT 05482-7797

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03470

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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 1164 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Archie Snider
Mailing Address 48 Orchard Hills Street
City Atherton State CA Zip Code 94027-5458
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 410.00
Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai03471
Amount of Each Receipt this Period 205.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul H. Snider
Mailing Address 5150 Madison Avenue
City Sacramento State CA Zip Code 95841-9623
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 25 / 2009
Transaction ID: 2009M04L11ai03472
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Dr. John M. Snodsmith
Mailing Address 57 Oak Lane
City Springfield State IL Zip Code 62712-8611
FEC ID number of contributing federal political committee. **C**
Name of Employer Clinical Radiologists, Inc. Occupation Physician
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai03473
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 755.00
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 1165 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Eddie R. Snyder
 Mailing Address P.O. Box 550
 City Yerington State NV Zip Code 89447-0550
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Self-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai03474
 Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Lester Snyder, III
 Mailing Address 50721 Chesapeake Drive
 City Novi State MI Zip Code 48374-2551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Self-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai03475
 Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Lester Snyder, III
 Mailing Address 50721 Chesapeake Drive
 City Novi State MI Zip Code 48374-2551
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Self-Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai03476
 Amount of Each Receipt this Period 200.00

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 1166 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Lester F. Snyder, Jr.
Mailing Address 808 Lovetta Drive

City State Zip Code
Dayton OH 45429-3138

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 18 / 2009**
Transaction ID: 2009M04L11ai03477
Amount of Each Receipt this Period **300.00**

B. Full Name (Last, First, Middle Initial)
Mrs. Sally M. Snyder
Mailing Address 555 5Th Avenue N.E.
Ph.2

City State Zip Code
St. Petersburg FL 33701-2663

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1250.00**

Date of Receipt **03 / 20 / 2009**
Transaction ID: 2009M04L11ai03478
Amount of Each Receipt this Period **1000.00**

C. Full Name (Last, First, Middle Initial)
Mr. Theodore M Snyder
Mailing Address 4861 Ocean View Boulevard

City State Zip Code
La Canada CA 91011-1235

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Real Estate Investment

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 31 / 2009**
Transaction ID: 2009M04L11ai03479
Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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 1167 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joseph M. Socha

Mailing Address 453 Clifton Avenue

City State Zip Code
Romeoville IL 60446-1418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Village Of Romeoville Custodian

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03480

Amount of Each Receipt this Period
120.00

B. Full Name (Last, First, Middle Initial)
Mr. William P. Sockman

Mailing Address 11250 Wellington Drive

City State Zip Code
Chardon OH 44024-9683

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Ashtabula Dental Associate Dentist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03481

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas M. Sodeman

Mailing Address 114 Thurstons Way

City State Zip Code
Mooresville NC 28117-7112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03482

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **870.00**

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 1168 / 1945
<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Thomas Sohner		Date of Receipt
	Mailing Address 4353 Cloverdale Road S.E.		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Cedar Rapids	IA	52411-6816
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03483
	C		Amount of Each Receipt this Period
		150.00	
Name of Employer Rockwill Collins, Inc.		Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Ismael De Leon Solis		Date of Receipt
	Mailing Address 645 Boronda Road		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Salinas	CA	93907-1719
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03484
	C		Amount of Each Receipt this Period
		100.00	
Name of Employer B.C. Harvesting		Occupation Farm Labor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		300.00	

C.	Full Name (Last, First, Middle Initial) Mr. Thomas G Somermeier		Date of Receipt
	Mailing Address 9599 Sunset Blvd.		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Beverly Hills	CA	90210
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03485
	C		Amount of Each Receipt this Period
		1000.00	
Name of Employer None		Occupation Ret.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		1000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1250.00"/>
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 1169 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. John S. Somerville, Jr.

Mailing Address 174 Buttonwood Drive

City State Zip Code
Fair Haven NJ 07704-3632

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03486

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Mr. John S. Somerville, Jr.

Mailing Address 174 Buttonwood Drive

City State Zip Code
Fair Haven NJ 07704-3632

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03487

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Mr. John E. Sommer

Mailing Address P.O. Box 75

City State Zip Code
Kidron OH 44636-0075

FEC ID number of contributing federal political committee. **C**

Name of Employer Kidron Division Servies Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03488

Amount of Each Receipt this Period
100.00

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: (check only one)	PAGE 1170 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Donna Sonderman	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address P.O. Box 1350 29570 Pacific Street	Transaction ID: 2009M04L11ai03489
	City State Zip Code Gold Beach OR 97444-1350	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ret. Occupation Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Dr. Joseph Song	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 515 10th Avenue	Transaction ID: 2009M04L11ai03490
	City State Zip Code San Francisco CA 94118	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Tpmg Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. James A. Sonntag	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 123 Peacock Drive	Transaction ID: 2009M04L11ai03491
	City State Zip Code San Rafael CA 94901-1552	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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 1171 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Todd Sorensen

Mailing Address 220453 E. 42Nd St.

City State Zip Code
Scottsbluff NE 69361-5727

FEC ID number of contributing federal political committee. **C**

Name of Employer Regional West Medical Center
Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03492

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Mark P. Sork

Mailing Address 316 Ruby Avenue

City State Zip Code
Newport Beach CA 92662-1130

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested
Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03493

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Frank Joseph Sosler

Mailing Address 7697 Hawks Nest Trail

City State Zip Code
Littleton CO 80125-9296

FEC ID number of contributing federal political committee. **C**

Name of Employer Lockheed Martin
Occupation Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03494

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1172 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Guillermina Soto		Date of Receipt
	Mailing Address 6121 N. Cynthia Ct.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 20 / 2009
	City	State	Zip Code
	Mcallen	TX	78504-2004
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03495
Name of Employer Sapphire Custom Mfg		Occupation Owner Of Sapphire	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 710.00	500.00

B.	Full Name (Last, First, Middle Initial) Dr. Wilber B. Spalding, Jr.		Date of Receipt
	Mailing Address 6900 Overhill Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 03 / 2009
	City	State	Zip Code
	Mission Hills	KS	66208-2769
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03496
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	500.00

C.	Full Name (Last, First, Middle Initial) Christine Spangler		Date of Receipt
	Mailing Address 3438 King George Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 26 / 2009
	City	State	Zip Code
	Orlando	FL	32835-5904
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03497
Name of Employer Marriott Vacation Club In-c.		Occupation Information Technology	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	250.00

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1173 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Frank Spann		Date of Receipt																					
	Mailing Address 6345 Bell Creek Court		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	6		2	0	0	9														
	City State Zip Code Grand Bay AL 36541-5122		Transaction ID: 2009M04L11ai03498																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600.00																						
Name of Employer Occupation Southern Truck & Equipment Owner		Receipt For: Aggregate Year-to-Date ▼ 600.00																						

B.	Full Name (Last, First, Middle Initial) Dr. James C Spann		Date of Receipt																					
	Mailing Address 7215 S. 26Th West Avenue		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	6		2	0	0	9														
	City State Zip Code Tulsa OK 74132-2200		Transaction ID: 2009M04L11ai03499																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00																						
Name of Employer Occupation Ardent Healthcare Physician		Receipt For: Aggregate Year-to-Date ▼ 1000.00																						

C.	Full Name (Last, First, Middle Initial) Mr. Charles Sparks		Date of Receipt																					
	Mailing Address 706 W. North Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	8		2	0	0	9														
	City State Zip Code Hinsdale IL 60521-3044		Transaction ID: 2009M04L11ai03500																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00																						
Name of Employer Occupation Charles Sparks & Company Architect		Receipt For: Aggregate Year-to-Date ▼ 250.00																						

SUBTOTAL of Receipts This Page (optional)	▶	1850.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1174 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mrs. Susan J. Spence

Mailing Address P.O. Box 498

City State Zip Code
Alto NM 88312-0553

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai03501

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Cleon & Ada Spencer

Mailing Address 9538 Pickwick Drive

City State Zip Code
Jacksonville FL 32257-5419

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03502

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Mr. John O. Spendrup

Mailing Address 409 W. Main Street

City State Zip Code
Grand Junction CO 81501-5609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai03503

Amount of Each Receipt this Period

300.00

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 1175 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stuart H. Spindel

Mailing Address P.O. Box 484

City State Zip Code
Hawesville KY 42348-0484

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03504

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mrs. Tonya H. Spivey

Mailing Address 1600 Fairway Drive

City State Zip Code
Vidalia GA 30474-5560

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03505

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Mr. Victor F Splan

Mailing Address 2713 North Franklin Road

City State Zip Code
Arlington VA 22201-3911

FEC ID number of contributing federal political committee. **C**

Name of Employer Decision Engineering Occupation Contractor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03506

Amount of Each Receipt this Period
200.00

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 1176 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Kae M. Spoerl	Date of Receipt MM / DD / YYYY 03 / 04 / 2009
	Mailing Address 3030 Broadmoor Lane	Transaction ID: 2009M04L11ai03507
	City State Zip Code State College PA 16801-2789	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00

B.	Full Name (Last, First, Middle Initial) Ms. Camille Sprio	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 19 Millbrook Place	Transaction ID: 2009M04L11ai03508
	City State Zip Code Bedford NY 10506-1700	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

C.	Full Name (Last, First, Middle Initial) Mr. Steven Sproles	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 9177 Pembridge Drive	Transaction ID: 2009M04L11ai03509
	City State Zip Code Mechanicsville VA 23116-4115	Amount of Each Receipt this Period 205.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Estes Express Lines, Inc. Occupation Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00

SUBTOTAL of Receipts This Page (optional)	705.00
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 1177 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Donna L. St. Louis

Mailing Address 930 Carlanna Lake Road
Apartment A30

City Ketchikan State AK Zip Code 99901-5657

FEC ID number of contributing federal political committee. **C**

Name of Employer Tongass Tower condominium Association Occupation Office Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03510

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Ms. Joan P. Stadler

Mailing Address 1755 N. State Route 560

City Urbana State OH Zip Code 43078-9666

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03511

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Ms. Helen L. Stairs

Mailing Address P.O. Box 216

City Sanford State FL Zip Code 32772-1892

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03512

Amount of Each Receipt this Period
200.00

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 1178 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert E. Stairs Mailing Address 10443 Tam O. Shanter Road City State Zip Code Pensacola FL 32514-8306 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 9 Transaction ID: 2009M04L11ai03513 Amount of Each Receipt this Period 150.00
B.	Full Name (Last, First, Middle Initial) Mr. Wallace A. Stanberry Mailing Address 625 Market Street Suite 200 City State Zip Code Shreveport LA 71101-5370 FEC ID number of contributing federal political committee. C Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9 Transaction ID: 2009M04L11ai03514 Amount of Each Receipt this Period 300.00
C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Richard L. Stangler Mailing Address 6968 Bullock Drive City State Zip Code San Diego CA 92114-7885 FEC ID number of contributing federal political committee. C Name of Employer Bowlers Depot Occupation Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9 Transaction ID: 2009M04L11ai03515 Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ▶

475.00

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 1179 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Richard L. Stangler		Date of Receipt
	Mailing Address 6968 Bullock Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2009
	City	State	Zip Code
	San Diego	CA	92114-7885
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03516
Name of Employer Bowlers Depot		Occupation Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	<input type="text"/> 50.00

B.	Full Name (Last, First, Middle Initial) Mr. Frank A. Stanisci		Date of Receipt
	Mailing Address 1144 S.W. 43Rd Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 25 / 2009
	City	State	Zip Code
	Cape Coral	FL	33914-5748
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03517
Name of Employer Labcorp		Occupation Sales Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text"/> 25.00

C.	Full Name (Last, First, Middle Initial) Ms. Jennifer A Stannard		Date of Receipt
	Mailing Address 17 Lewis Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	Stamford	CT	06905-2214
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03518
Name of Employer Health Net		Occupation Account Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 100.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 175.00
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 1180 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Walter Pe Stansbury	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 1035 Lake View Drive	Transaction ID: 2009M04L11ai03519
	City State Zip Code Boyne City MI 49712-9657	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) Mrs. Beverly Stanton	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 21335 N. Shotgun Ridge Road	Transaction ID: 2009M04L11ai03520
	City State Zip Code Paulden AZ 86334-4322	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Homemaker Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00

C.	Full Name (Last, First, Middle Initial) Mr. Michael D. Stanton-Hicks	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 11405 Clearfield Lane	Transaction ID: 2009M04L11ai03521
	City State Zip Code Chardon OH 44024-9051	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer C.C.F. Occupation Vice Chairperson Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00

SUBTOTAL of Receipts This Page (optional)	▶	825.00
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 1181 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Michael D. Stanton-Hicks

Mailing Address 11405 Clearfield Lane

City State Zip Code
Chardon OH 44024-9051

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C.C.F. Vice Chairperson

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03522

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Dr. Catherine M. Stark

Mailing Address 1219 Tiverton Trail Drive

City State Zip Code
Rochester Hills MI 48306-4073

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Oakland-Macomb Ob/Gyn, Pc Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai03523

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Dr. Catherine M. Stark

Mailing Address 1219 Tiverton Trail Drive

City State Zip Code
Rochester Hills MI 48306-4073

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Oakland-Macomb Ob/Gyn, Pc Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 0 9

Transaction ID: 2009M04L11ai03524

Amount of Each Receipt this Period
250.00

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: (check only one)	PAGE 1182 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Andy Starling		Date of Receipt																					
	Mailing Address 2408 Brookwood Trail		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	6		2	0	0	9														
	City State Zip Code Sanford NC 27330-8200		Transaction ID: 2009M04L11ai03525																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Sanford Steel Corp Occupation: President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		50.00																						

B.	Full Name (Last, First, Middle Initial) Mr. Andy Starling		Date of Receipt																					
	Mailing Address 2408 Brookwood Trail		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	6		2	0	0	9														
	City State Zip Code Sanford NC 27330-8200		Transaction ID: 2009M04L11ai03526																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Sanford Steel Corp Occupation: President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		50.00																						

C.	Full Name (Last, First, Middle Initial) Mrs. Mary G. Starr		Date of Receipt																					
	Mailing Address 2529 U.S. Highway 73		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	1		2	0	0	9														
	City State Zip Code Hiawatha KS 66434-8201		Transaction ID: 2009M04L11ai03527																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		220.00																						

SUBTOTAL of Receipts This Page (optional)	▶	320.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1183 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Gary Allen Stayer Mailing Address 894 Tupelo Wood Court City State Zip Code Newbury Park CA 91320-3648 FEC ID number of contributing federal political committee. C Name of Employer Pamtech Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9 Transaction ID: 2009M04L11ai03528 Amount of Each Receipt this Period 300.00
B.	Full Name (Last, First, Middle Initial) Mrs. Faith Joy Stazzoni Mailing Address 945 Park Lane City State Zip Code Santa Barbara CA 93108-1421 FEC ID number of contributing federal political committee. C Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9 Transaction ID: 2009M04L11ai03529 Amount of Each Receipt this Period 500.00
C.	Full Name (Last, First, Middle Initial) Mr. Henry Stein Mailing Address 580 Ashwood Road City State Zip Code Springfield NJ 07081-2527 FEC ID number of contributing federal political committee. C Name of Employer Atlantic Realty Occupation Real Estate Developer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9 Transaction ID: 2009M04L11ai03530 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	1050.00
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 1184 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Donald J. Steinbeisser		Date of Receipt	
	Mailing Address 11918 County Road 348		M M / D D / Y Y Y Y Y 03 / 26 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03531
	Sidney	MT	59270-6356	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		150.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

B.	Full Name (Last, First, Middle Initial) Dr. Donald Steiner		Date of Receipt	
	Mailing Address 1S702 Birchbrook Court		M M / D D / Y Y Y Y Y 03 / 12 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03532
	Glen Ellyn	IL	60137-6880	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		450.00		

C.	Full Name (Last, First, Middle Initial) Mr. Jeffrey Steinkamp		Date of Receipt	
	Mailing Address P. O. Box 98		M M / D D / Y Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03533
	Rochester	VT	05767-0098	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		2000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1185 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. James R. Stelmach

Mailing Address 2625 E. Southern Avenue
Unit C270

City State Zip Code
Tempe AZ 85282-7656

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03534

Amount of Each Receipt this Period
125.00

B.

Full Name (Last, First, Middle Initial)
Mr. Kurt Stephan

Mailing Address 12318 N. Golf Dr.

City State Zip Code
Mequon WI 53092-2447

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai03535

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Richard Stephan

Mailing Address 600 W Germantown Pike

City State Zip Code
Plymouth Meeting PA 19462-1046

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Linck and Steophan Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai03536

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

925.00

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 1186 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Alice Stephens		Date of Receipt
	Mailing Address 1404 Rachel Lane		<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tallahassee	FL	32308-7723
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai03537
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="100.00"/>

B.	Full Name (Last, First, Middle Initial) Mrs. Alice Stephens		Date of Receipt
	Mailing Address 1404 Rachel Lane		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tallahassee	FL	32308-7723
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai03538
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="100.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Phil W. Stephenson		Date of Receipt
	Mailing Address 115 Neal Road		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Wharton	TX	77488-2711
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai03539
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

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: (check only one)	PAGE 1187 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Dick J. Sterk		Date of Receipt MM / DD / YYYY 03 / 04 / 2009		
	Mailing Address 1918 Mirmar Lane		Transaction ID: 2009M04L11ai03540		
	City Munster	State IN	Zip Code 46321-2719	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Christopher R. Steuri		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address P.O. Box 884 4300 Kai Ikena Drive		Transaction ID: 2009M04L11ai03541		
	City Kalaheo	State HI	Zip Code 96741-0884	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Koa Kea Hotel Resort	Occupation General Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00			

C.	Full Name (Last, First, Middle Initial) Mr. James E. Stevens		Date of Receipt MM / DD / YYYY 03 / 11 / 2009		
	Mailing Address 90 Hart Rd.		Transaction ID: 2009M04L11ai03542		
	City Barrington	State IL	Zip Code 60010-2665	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Stevens Pump, Co.	Occupation President			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

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 1188 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Larry R. Stevens

Mailing Address 4 Mistywood Ln.

City State Zip Code
Sandy UT 84092-4850

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Med One Capital, Inc. Business Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03543

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard C. Stevens

Mailing Address 3091 Highlands Bridge Rd.

City State Zip Code
Sarasota FL 34235-6842

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03544

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Thomas H. Stevens

Mailing Address 1102 S.E. Mitchell Avenue
Apartment 301

City State Zip Code
Port Saint Lucie FL 34952-5937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Enviroseal Corporation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03545

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1189 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William T.C. Stevens

Mailing Address 4024 S.W. Tualatin Avenue

City State Zip Code
Portland OR 97239-1574

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03546

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Dr. Carl R. Stevenson

Mailing Address 3931 West 87th Street

City State Zip Code
Tulsa OK 74132-4138

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Assoc. Anes., Inc. Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai03547

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. John A. Stevenson

Mailing Address 24574 State Route 104

City State Zip Code
Circleville OH 43113-9666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S.D.A. State Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03548

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► 230.00

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 1190 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John A. Stevenson

Mailing Address 24574 State Route 104

City State Zip Code
Circleville OH 43113-9666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S.D.A. State Executive Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03549

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Kathryn Stevenson

Mailing Address 4510 Arniel Place

City State Zip Code
Fairfax VA 22030-5755

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03550

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Lt. Raymond Steventon, USN (Ret)

Mailing Address 6902 Parkside Circle
Apartment 102

City State Zip Code
De Forest WI 53532-1915

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03551

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 1191 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Terry J. Stevinson		Date of Receipt																					
	Mailing Address 14744 W. 32nd Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	6		2	0	0	9														
	City State Zip Code Golden CO 80401-1417		Transaction ID: 2009M04L11ai03552																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Stevinson Group Occupation: Corporate Secretary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1150.00		<table border="1"> <tr> <td colspan="10">50.00</td> </tr> </table>		50.00																				
50.00																								

B.	Full Name (Last, First, Middle Initial) Mr. Terry J. Stevinson		Date of Receipt																					
	Mailing Address 14744 W. 32nd Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		3	1		2	0	0	9														
	City State Zip Code Golden CO 80401-1417		Transaction ID: 2009M04L11ai03553																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Stevinson Group Occupation: Corporate Secretary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1150.00		<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																				
1000.00																								

C.	Full Name (Last, First, Middle Initial) Mr. Campbell Steward		Date of Receipt																					
	Mailing Address 65 Asbury Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	3		2	0	0	9														
	City State Zip Code Topsfield MA 01983-1501		Transaction ID: 2009M04L11ai03554																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Kona Corporation Occupation: Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																				
1000.00																								

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>2050.00</td></tr></table>	2050.00
2050.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1192 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Aroona B Stewart

Mailing Address 22680 Hidden Hills Road

City Yorba Linda State CA Zip Code 92887-2800

FEC ID number of contributing federal political committee. **C**

Name of Employer Placentia Linda Hospital Occupation Registered Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03555
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Gordon W. Stewart

Mailing Address P.O. Box 474

City Sonora State TX Zip Code 76950-0474

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai03556
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Gordon W. Stewart

Mailing Address P.O. Box 474

City Sonora State TX Zip Code 76950-0474

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 595.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai03557
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1193 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert Stewart

Mailing Address 2419 Fairbanks Dr.

City State Zip Code
Clearwater FL 33764-2811

FEC ID number of contributing federal political committee. **C**

Name of Employer Task Force Logistics Occupation Business Management

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03558

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. George A. Stickels

Mailing Address 1515 Jefferson Davis Highway
Apartment 1202

City State Zip Code
Arlington VA 22202-3313

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S.D.A. Occupation Agr Program Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai03559

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. George A. Stickels

Mailing Address 1515 Jefferson Davis Highway
Apartment 1202

City State Zip Code
Arlington VA 22202-3313

FEC ID number of contributing federal political committee. **C**

Name of Employer U.S.D.A. Occupation Agr Program Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai03560

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1194 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Byron C. Stickler

Mailing Address 514 Washington Street

City State Zip Code
Quincy IL 62301-4864

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03561

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mr. Gerard Stitt

Mailing Address 319 Barksdale Ave.

City State Zip Code
Waldorf MD 20602

FEC ID number of contributing federal political committee. **C**

Name of Employer DynCorp Occupation Helicopter Technician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai03562

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
Mr. Gerard Stitt

Mailing Address 319 Barksdale Ave.

City State Zip Code
Waldorf MD 20602

FEC ID number of contributing federal political committee. **C**

Name of Employer DynCorp Occupation Helicopter Technician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03563

Amount of Each Receipt this Period
80.00

SUBTOTAL of Receipts This Page (optional) ▶ **420.00**

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 1195 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Gerard Stitt

Mailing Address 319 Barksdale Ave.

City State Zip Code
Waldorf MD 20602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dyncorp Helicopter Technician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai03564

Amount of Each Receipt this Period

40.00

B.

Full Name (Last, First, Middle Initial)
Mr. Gerard Stitt

Mailing Address 319 Barksdale Ave.

City State Zip Code
Waldorf MD 20602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dyncorp Helicopter Technician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai03565

Amount of Each Receipt this Period

40.00

C.

Full Name (Last, First, Middle Initial)
Mr. Gerard Stitt

Mailing Address 319 Barksdale Ave.

City State Zip Code
Waldorf MD 20602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dyncorp Helicopter Technician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai03566

Amount of Each Receipt this Period

40.00

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: PAGE 1196 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Rob Stitt

Mailing Address 2901 Slough Drive

City State Zip Code
Temple TX 76502-3975

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. Army Logistics Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03567

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Joseph Stocks

Mailing Address 1835 Enterprise Street

City State Zip Code
Waukesha WI 53189-7426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Waukesha Electric Systems Laborer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03568

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joseph Stocks

Mailing Address 1835 Enterprise Street

City State Zip Code
Waukesha WI 53189-7426

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Waukesha Electric Systems Laborer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03569

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **600.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1197 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Joseph Stocks	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 1835 Enterprise Street	Transaction ID: 2009M04L11ai03570
	City State Zip Code Waukesha WI 53189-7426	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Waukesha Electric Systems Laborer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Joseph Stocks	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 1835 Enterprise Street	Transaction ID: 2009M04L11ai03571
	City State Zip Code Waukesha WI 53189-7426	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Waukesha Electric Systems Laborer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. Scott Stockton	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 4702 N. Blazingstar Trl.	Transaction ID: 2009M04L11ai03572
	City State Zip Code Castle Rock CO 80109-9400	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Requested Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	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 1198 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William B. Stockwell

Mailing Address 892 Lafayette Drive

City State Zip Code
Mount Laurel NJ 08054-3241

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Stockwell Elastomerics, Inc Business Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03573

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Dr. Sherwood B. Stolp

Mailing Address 1907 Martha Washington Drive

City State Zip Code
Wauwatosa WI 53213-2468

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03574

Amount of Each Receipt this Period
45.00

C. Full Name (Last, First, Middle Initial)
Dr. Sherwood B. Stolp

Mailing Address 1907 Martha Washington Drive

City State Zip Code
Wauwatosa WI 53213-2468

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai03575

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ▶ **475.00**

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 1199 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Sherwood B. Stolp		Date of Receipt	
	Mailing Address 1907 Martha Washington Drive		M M / D D / Y Y Y Y Y 03 / 31 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03576
	Wauwatosa	WI	53213-2468	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		45.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		210.00		

B.	Full Name (Last, First, Middle Initial) Mr. David Stone		Date of Receipt	
	Mailing Address 300 Plantation View Lane		M M / D D / Y Y Y Y Y 03 / 26 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03577
	Mount Pleasant	SC	29464-6228	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		500.00		

C.	Full Name (Last, First, Middle Initial) Mr. Kenneth Stone		Date of Receipt	
	Mailing Address 1077 Bromley Ave		M M / D D / Y Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03578
	Teaneck	NJ	07666-1918	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		75.00	
Name of Employer Peak Search Inc		Occupation Executive Recruiter		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		225.00		

SUBTOTAL of Receipts This Page (optional)	▶	620.00
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 1200 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms Linda S. Stone

Mailing Address 2121 Carroll Creek View Court

City State Zip Code
Frederick MD 21702-5902

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai03579
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Ms. Mary L. Stone

Mailing Address 6 Whittier Place
Apartment 6P

City State Zip Code
Boston MA 02114-1406

FEC ID number of contributing federal political committee. **C**

Name of Employer Capital Growth Management Occupation Associate Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai03580
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard F. Storm

Mailing Address P.O. Box 429
900 Colonial Drive

City State Zip Code
Albemarle NC 28002-0429

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 03 / 2009
Transaction ID: 2009M04L11ai03581
Amount of Each Receipt this Period: 200.00

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 1201 / 1945
	(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"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. M. J. Strahm	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 1705 Roosevelt Street Apartment 61	Transaction ID: 2009M04L11ai03582
	City State Zip Code Sabetha KS 66534-2156	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00

B.	Full Name (Last, First, Middle Initial) Mr. Michael Strain	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 3818 Colony Woods Drive	Transaction ID: 2009M04L11ai03583
	City State Zip Code Sugar Land TX 77479-2843	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Spectrum Digital, Inc. Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00

C.	Full Name (Last, First, Middle Initial) Mr. Leroy Strand	Date of Receipt MM / DD / YYYY 03 / 12 / 2009
	Mailing Address 482 Strand Lane P.O. Box 29	Transaction ID: 2009M04L11ai03584
	City State Zip Code Geyser MT 59447-0029	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

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 1202 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Ada A. Strassenburgh

Mailing Address P.O. Box 608

City State Zip Code
Ocean View NJ 08230-0608

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03585

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Gerald Stratbucker

Mailing Address 6796 Meadow View Drive

City State Zip Code
Summerfield NC 27358-9153

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai03586

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Gerald Stratbucker

Mailing Address 6796 Meadow View Drive

City State Zip Code
Summerfield NC 27358-9153

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai03587

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: PAGE 1203 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Terry Lee Stratton

Mailing Address 497 Choate Road

City State Zip Code
Alvin TX 77511-0422

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03588

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mr. Charles S. Strauch

Mailing Address 1681 Kettering

City State Zip Code
Irvine CA 92614-5613

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
GA Services, L.L.C. Chairman/Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai03589

Amount of Each Receipt this Period
15000.00

C.

Full Name (Last, First, Middle Initial)
Ms. Jocelyn Straus

Mailing Address 555 Argyle Avenue

City State Zip Code
San Antonio TX 78209-5612

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai03590

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ▶

15600.00

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 1204 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Miss Yolande H. Strawinski
Mailing Address 1130 Sylvan Place

City Monterey State CA Zip Code 93940-4903

FEC ID number of contributing federal political committee. **C**

Name of Employer New York Life Ins. Co. Occupation Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11ai03591
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Alexis Street
Mailing Address 1372 May Ave

City Atlanta State GA Zip Code 30316

FEC ID number of contributing federal political committee. **C**

Name of Employer The Street Household Occupation Stay At Home Mom

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai03592
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Miss Doris Strelczyk
Mailing Address 202 Fleetwood Drive

City Victoria State TX Zip Code 77901-3612

FEC ID number of contributing federal political committee. **C**

Name of Employer Hall Electric Company, Inc. Occupation Sales Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 19 / 2009
Transaction ID: 2009M04L11ai03593
Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) ► 1150.00

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 1205 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. James Strickland		Date of Receipt MM / DD / YYYY 03 / 06 / 2009		
	Mailing Address 545 Blue Heron Way		Transaction ID: 2009M04L11ai03594		
	City Alpharetta	State GA	Zip Code 30004-2770	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested	Occupation Requested	Aggregate Year-to-Date 1000.00		

B.	Full Name (Last, First, Middle Initial) Mr. Paul A. Strickland		Date of Receipt MM / DD / YYYY 03 / 30 / 2009		
	Mailing Address 543 N. Marlborough Circle		Transaction ID: 2009M04L11ai03595		
	City Shreveport	State LA	Zip Code 71106-6132	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation Self-Employed	Aggregate Year-to-Date 250.00		

C.	Full Name (Last, First, Middle Initial) Ms. Judith S. Strickler		Date of Receipt MM / DD / YYYY 03 / 31 / 2009		
	Mailing Address 1880 Keezletown Road		Transaction ID: 2009M04L11ai03596		
	City Harrisonburg	State VA	Zip Code 22802-2707	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1206 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Nathan Stringer

Mailing Address P.O. Box 868

City State Zip Code
Laurel MS 39441-0868

FEC ID number of contributing federal political committee. **C**

Name of Employer
B. & R. Industrial Supply Company
Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai03597

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Nathan Stringer

Mailing Address P.O. Box 868

City State Zip Code
Laurel MS 39441-0868

FEC ID number of contributing federal political committee. **C**

Name of Employer
B. & R. Industrial Supply Company
Occupation
President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai03598

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Merle D. Strowmatt

Mailing Address P.O. Box 82

City State Zip Code
Versailles MO 65084-0082

FEC ID number of contributing federal political committee. **C**

Name of Employer
Self-Employed
Occupation
Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03599

Amount of Each Receipt this Period
150.00

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 1207 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Z. K. Strzalkowski	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 6 Dandelion Drive	Transaction ID: 2009M04L11ai03600
	City State Zip Code Boiling Springs PA 17007-9735	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Z. K. Strzalkowski	Date of Receipt MM / DD / YYYY 03 / 13 / 2009
	Mailing Address 6 Dandelion Drive	Transaction ID: 2009M04L11ai03601
	City State Zip Code Boiling Springs PA 17007-9735	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. William Stuart	Date of Receipt MM / DD / YYYY 03 / 13 / 2009
	Mailing Address P.O. Box 347	Transaction ID: 2009M04L11ai03602
	City State Zip Code Billings MT 59103	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation First Interstate Bank Trust Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	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 1208 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) T. Stubblefield	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 3521 E. Sunshine St.	Transaction ID: 2009M04L11ai03603
	City State Zip Code Springfield MO 65809-2814	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Reliable Automotive, Inc. Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. Thomas Sturges	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 420 Avon Drive	Transaction ID: 2009M04L11ai03604
	City State Zip Code Pittsburgh PA 15228-2104	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Pennsylvania Drilling Company Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Dr. Murry B. Sturkie	Date of Receipt MM / DD / YYYY 03 / 13 / 2009
	Mailing Address 1996 E. Handel Court	Transaction ID: 2009M04L11ai03605
	City State Zip Code Meridian ID 83646-4734	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Emergency Medicine Of Idaho, P.C. Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1209 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Philip Joseph Stutes		Date of Receipt
	Mailing Address 1350 S. Richfield Road		<input type="text" value="03"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Duson	LA	70529-3301
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 2009M04L11ai03606
Name of Employer Fugro Chance Inc.		Occupation Engineer/Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="750.00"/>	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Ms. Amy Styczynski		Date of Receipt
	Mailing Address 6239 Northwood Road		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Dallas	TX	75225-2822
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 2009M04L11ai03607
Name of Employer Requested		Occupation Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Ms. Ivonne Gatell Suarez		Date of Receipt
	Mailing Address 13315 S.W. 1St Terrace		<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Miami	FL	33184-1113
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 2009M04L11ai03608
Name of Employer Requested		Occupation Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
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 1210 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Col. Charles L. Sues, U.S.A. (Re)	Date of Receipt
	Mailing Address 2710 Sailors Way	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City State Zip Code Naples FL 34109-7624	Transaction ID: 2009M04L11ai03609
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

B.	Full Name (Last, First, Middle Initial) Mr. Howard O. Suhm	Date of Receipt
	Mailing Address 317 Indian Bluff Drive	<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City State Zip Code Kerrville TX 78028-2008	Transaction ID: 2009M04L11ai03610
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="725.00"/>	

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Eugene Sukup	Date of Receipt
	Mailing Address 1379 Beeds Lake Drive	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City State Zip Code Hampton IA 50441-7437	Transaction ID: 2009M04L11ai03611
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="300.00"/>
Name of Employer Sukey Manufacturing Company	Occupation Board Chair	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1800.00"/>
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 1211 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Mary E. Sukup
Mailing Address 1379 Beeds Lake Drive
City Hampton State IA Zip Code 50441-7437
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai03612
Amount of Each Receipt this Period 400.00

B. Full Name (Last, First, Middle Initial)
Mr. Ed Sulcer
Mailing Address 11562 Columbia Highway
City Lynnville State TN Zip Code 38472-5065
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00
Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai03613
Amount of Each Receipt this Period 110.00

C. Full Name (Last, First, Middle Initial)
Ms. Valerie Jean Sulfaro
Mailing Address 2550 Maple Road
City Saginaw State MI Zip Code 48601-9415
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai03614
Amount of Each Receipt this Period 375.00

SUBTOTAL of Receipts This Page (optional) ► 885.00
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 1212 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Donna J Sullivan	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 504 Calera Place	Transaction ID: 2009M04L11ai03615
	City State Zip Code Fort Worth TX 76114-4121	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

B.	Full Name (Last, First, Middle Initial) Ms. Emilie P. O. Sullivan	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 265 E. 66Th Street Apartment 10C	Transaction ID: 2009M04L11ai03616
	City State Zip Code New York NY 10065-6490	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

C.	Full Name (Last, First, Middle Initial) Ms. Emilie P. O. Sullivan	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 265 E. 66Th Street Apartment 10C	Transaction ID: 2009M04L11ai03617
	City State Zip Code New York NY 10065-6490	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1213 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Harley Sullivan
Mailing Address 920 Congress Ave. #200
City Austin State TX Zip Code 78701
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai03618
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. John D. Sullivan
Mailing Address 2210 Collingwood Road
City Alexandria State VA Zip Code 22308-1518
FEC ID number of contributing federal political committee. **C**
Name of Employer U.S. Chamber Of Commerce Occupation Association
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00
Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai03619
Amount of Each Receipt this Period 225.00

C. Full Name (Last, First, Middle Initial)
Ms. Lynn S. Sullivan
Mailing Address 356 Summit County Road 2407
City Silverthorne State CO Zip Code 80498
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai03620
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 975.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1214 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Mark Sullivan

Mailing Address 1428 Amador Ln.

City Pinon Hills State CA Zip Code 92372-9366

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 03 / 05 / 2009
Transaction ID: 2009M04L11ai03621
Amount of Each Receipt this Period: 110.00

B. Full Name (Last, First, Middle Initial)
Mr. N. Dennis Sulser

Mailing Address 5085 Old Traveller Lane

City Mechanicsville State VA Zip Code 23111-6429

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai03622
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Danny Summers

Mailing Address 1500 S. 3000 E.

City Sugar City State ID Zip Code 83448-1231

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai03623
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 460.00

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 1215 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Shirley Frances Summers

Mailing Address 200 Edgemere Court

City State Zip Code
Oklahoma City OK 73118-8624

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03624

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
Mr. Robert Sunderland

Mailing Address 953 Pyrite Avenue

City State Zip Code
Henderson NV 89011-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03625

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Sunderland

Mailing Address 953 Pyrite Avenue

City State Zip Code
Henderson NV 89011-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03626

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **425.00**

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 1216 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Robert Sunderland

Mailing Address 953 Pyrite Avenue

City State Zip Code
Henderson NV 89011-3059

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1100.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai03627

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. John H. Sundstrom

Mailing Address 405 Roseneath Road

City State Zip Code
Richmond VA 23221-2341

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03628

Amount of Each Receipt this Period
225.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Rozene R. Supple

Mailing Address 1850 Smoke Tree Lane

City State Zip Code
Palm Springs CA 92264-1602

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2009

Transaction ID: 2009M04L11ai03629

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

825.00

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 1217 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Daniel Surrells

Mailing Address P.O. Box 258
75 Old Main Street

City Eagle Lake State ME Zip Code 04739-0258

FEC ID number of contributing federal political committee. **C**

Name of Employer Northeast Cad Occupation Self Employed/Drafting

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03630

Amount of Each Receipt this Period
200.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Elizabeth H. Sutro

Mailing Address 3598 Jackson Street

City San Francisco State CA Zip Code 94118-1808

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03631

Amount of Each Receipt this Period
210.00

C.

Full Name (Last, First, Middle Initial)
Mr. Howard E. Sutton

Mailing Address P.O. Box 639

City Oil City State LA Zip Code 71061-0639

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03632

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **660.00**

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 1218 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Linda M. Sutton		Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address P.O. Box 4027		Transaction ID: 2009M04L11ai03633
	City Kingman	State AZ	Zip Code 86402-4027
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer Self-Employed	Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. Michael J. Svetlic		Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 7111 Country Wood Lane		Transaction ID: 2009M04L11ai03634
	City Kansas City	State MO	Zip Code 64152-1199
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Self-Employed	Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. William Swaim		Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 2768 W. Casas Drive		Transaction ID: 2009M04L11ai03635
	City Tucson	State AZ	Zip Code 85742-9777
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

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 1219 / 1945
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. David Swain	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 17258 E. Melody Drive	Transaction ID: 2009M04L11ai03636
	City State Zip Code Higley AZ 85234-0004	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Ms. Sarah Swamy	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 8635 Edgerton Blvd.	Transaction ID: 2009M04L11ai03637
	City State Zip Code Jamaica NY 11432-2936	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Bank Of New York Mellon Desk Supervisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Perry R. Swanson	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 1700 Grandview Avenue Apartment 403	Transaction ID: 2009M04L11ai03638
	City State Zip Code Pittsburgh PA 15211-1050	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1220 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. James E. Swart
Mailing Address 13652 Pine Villa Lane

City State Zip Code
Fort Myers FL 33912-1616

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03639

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. James E. Swart
Mailing Address 13652 Pine Villa Lane

City State Zip Code
Fort Myers FL 33912-1616

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03640

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Mildred M. Swartzmiller
Mailing Address 319 S. Wood Street

City State Zip Code
Chesaning MI 48616-1355

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03641

Amount of Each Receipt this Period
300.00

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 1221 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Patrick H. Swearingen, Jr.
Mailing Address 310 Argyle Avenue

City San Antonio State TX Zip Code 78209-5609

FEC ID number of contributing federal political committee. **C**

Name of Employer Cox Smith Matthews, Inc. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai03642
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Douglas Sweet
Mailing Address 3385 Eagle Bluff Drive

City Mound State MN Zip Code 55364-8596

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai03643
Amount of Each Receipt this Period 150.00

C. Full Name (Last, First, Middle Initial)
Mr. Vernal R. Swenson
Mailing Address 1448 N. 1180 E.

City Shelley State ID Zip Code 83274-5100

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 03 / 26 / 2009
Transaction ID: 2009M04L11ai03644
Amount of Each Receipt this Period 50.00

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 1222 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Keith R. Swerdfefer

Mailing Address 421 E. Industrial Blvd.

City State Zip Code
Pueblo CO 81007-1415

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai03645

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Charles P. Swift

Mailing Address 30 Cara Drive

City State Zip Code
Nanuet NY 10954-3701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Montalbano, Condon & Frank, P. Attorney

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03646

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mr. Charles P. Swift

Mailing Address 30 Cara Drive

City State Zip Code
Nanuet NY 10954-3701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Montalbano, Condon & Frank, P. Attorney

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03647

Amount of Each Receipt this Period
50.00

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: (check only one)	PAGE 1223 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles P. Swift

Mailing Address 30 Cara Drive

City State Zip Code
Nanuet NY 10954-3701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Montalbano, Condon & Frank, P. Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **03 / 31 / 2009**

Transaction ID: 2009M04L11ai03648

Amount of Each Receipt this Period **25.00**

B. Full Name (Last, First, Middle Initial)
Mr. John B. Swift, Jr.

Mailing Address 1809 Swift Mill Road

City State Zip Code
Atmore AL 36502-1007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **03 / 11 / 2009**

Transaction ID: 2009M04L11ai03649

Amount of Each Receipt this Period **500.00**

C. Full Name (Last, First, Middle Initial)
Dr. Guat S. Sy, Jr.

Mailing Address 29828 Cottonwood Court

City State Zip Code
Farmington Hills MI 48331-1922

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 26 / 2009**

Transaction ID: 2009M04L11ai03650

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional) ► **775.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1224 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Slawomir Szczepanski

Mailing Address 641 W. Willow Street
Apartment 107

City Chicago State IL Zip Code 60614-5176

FEC ID number of contributing federal political committee. **C**

Name of Employer Jenkes & Gilchrist Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03651

Amount of Each Receipt this Period
220.00

B. Full Name (Last, First, Middle Initial)
Mr. Lee L. Tabler

Mailing Address 8 Revell Street

City Annapolis State MD Zip Code 21401-2611

FEC ID number of contributing federal political committee. **C**

Name of Employer Tdic Occupation Ceo

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai03652

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey P. Taft

Mailing Address 1001 N. Randolph Street
Apartment 810

City Arlington State VA Zip Code 22201-5608

FEC ID number of contributing federal political committee. **C**

Name of Employer Mayer Brown Llp Occupation Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03653

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 1020.00

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 1225 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. James M. Tait		Date of Receipt MM / DD / YYYY 03 / 13 / 2009		
	Mailing Address 700 Rockefeller Road		Transaction ID: 2009M04L11ai03654		
	City Lake Forest	State IL	Zip Code 60045-3144	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) Mr. Roy Takeda		Date of Receipt MM / DD / YYYY 03 / 25 / 2009		
	Mailing Address 3940 Royal Oak Place		Transaction ID: 2009M04L11ai03655		
	City Encino	State CA	Zip Code 91436-3918	Amount of Each Receipt this Period 220.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self-Employed	Occupation Self-Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 470.00			

C.	Full Name (Last, First, Middle Initial) Mr. David Takesian		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 18 Westwood Terrace		Transaction ID: 2009M04L11ai03656		
	City Lawrence	State MA	Zip Code 01843-1922	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested	Occupation Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00			

SUBTOTAL of Receipts This Page (optional)	▶	410.00
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 1226 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David Takesian

Mailing Address 18 Westwood Terrace

City State Zip Code
Lawrence MA 01843-1922

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03657

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
Mr. O. James Talbott, II

Mailing Address 10 Ruxton Hill Rd.

City State Zip Code
Towson MD 21204-3551

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
Mercantile Bankshores Corporation Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03658

Amount of Each Receipt this Period
105.00

C. Full Name (Last, First, Middle Initial)
Ms. Jennie L. Taliaferro

Mailing Address 5502 Glenwick Ln.

City State Zip Code
Dallas TX 75209-5108

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
Self Real Estate Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03659

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► **170.00**

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 1227 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Jennie L. Taliaferro

Mailing Address 5502 Glenwick Ln.

City State Zip Code
Dallas TX 75209-5108

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation
Real Estate Development

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03660

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Mr. James M. Talkington

Mailing Address 6241 Little Dirt Rd.

City State Zip Code
Panama City FL 32404-5728

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai03661

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Edwin Talledo

Mailing Address 3804 Platt Avenue

City State Zip Code
Lynwood CA 90262-3633

FEC ID number of contributing federal political committee. **C**

Name of Employer Unemployed Occupation Unemployed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03662

Amount of Each Receipt this Period
600.00

SUBTOTAL of Receipts This Page (optional) ► **1175.00**

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 1228 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Steven Tappe		Date of Receipt		
	Mailing Address 3140 S Peoria K228		M M / D D / Y Y Y Y 03 / 19 / 2009		
	City Aurora	State CO	Zip Code 80014	Transaction ID: 2009M04L11ai03663	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00		
	Name of Employer Self	Occupation Property Management			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

B.	Full Name (Last, First, Middle Initial) Mr. Anthony G. Tappin		Date of Receipt		
	Mailing Address 528 Forest Mews Drive		M M / D D / Y Y Y Y 03 / 23 / 2009		
	City Oak Brook	State IL	Zip Code 60523-2618	Transaction ID: 2009M04L11ai03664	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00		
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

C.	Full Name (Last, First, Middle Initial) Mr. Anthony G. Tappin		Date of Receipt		
	Mailing Address 528 Forest Mews Drive		M M / D D / Y Y Y Y 03 / 26 / 2009		
	City Oak Brook	State IL	Zip Code 60523-2618	Transaction ID: 2009M04L11ai03665	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00		
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

SUBTOTAL of Receipts This Page (optional)	▶	550.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1229 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Charles Tashjian

Mailing Address 56 Dartmouth Street

City State Zip Code
Medford MA 02155-5950

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1200.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai03666

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Stanley G. Tate

Mailing Address 1175 N.E. 125Th Street Suite 102

City State Zip Code
North Miami FL 33161-5009

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 30400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai03667

Amount of Each Receipt this Period

30400.00

C.

Full Name (Last, First, Middle Initial)
Mr. David W. Tauber

Mailing Address P.O. Box 4645

City State Zip Code
Houston TX 77210-4645

FEC ID number of contributing federal political committee. **C**

Name of Employer Tauber Oil Company Occupation Requested

Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai03668

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)

31100.00

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 1230 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Arthur Tauck

Mailing Address 6 Bluff Pt

City State Zip Code
Westport CT 06880-6902

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03669

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Mr. Christopher T. Taylor

Mailing Address 16 Whitfield Road

City State Zip Code
Baltimore MD 21210-2928

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03670

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Deborah R. Taylor

Mailing Address 1050 Seminole Drive
Penthouse B.

City State Zip Code
Fort Lauderdale FL 33304-3225

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03671

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional) ► 950.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1231 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Edmund F. Taylor		Date of Receipt	
	Mailing Address 96 Clifffield Road		M M / D D / Y Y Y Y 03 / 03 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03672
	Bedford	NY	10506-1208	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Credit Suisse First Boston		Occupation Investment Banker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		1000.00		

B.	Full Name (Last, First, Middle Initial) Mrs. Janice Taylor		Date of Receipt	
	Mailing Address 290 Brandywine Drive		M M / D D / Y Y Y Y 03 / 20 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03673
	Colorado Springs	CO	80906-7666	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer Homemaker		Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		300.00		

C.	Full Name (Last, First, Middle Initial) Mr. Joel Taylor		Date of Receipt	
	Mailing Address 7812 Cadbury Avenue		M M / D D / Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03674
	Potomac	MD	20854-2995	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Ts&L		Occupation Ceo		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		500.00		

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
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 1232 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Raynor A.K. Taylor

Mailing Address 813 Mariposa Court

City Virginia Beach State VA Zip Code 23455-4700

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai03675
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Ronald Taylor

Mailing Address 13032 Bow Place

City Santa Ana State CA Zip Code 92705-2014

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: 2009M04L11ai03676
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Thad M. Taylor

Mailing Address 2704 S. Grove Street

City Arlington State VA Zip Code 22202-2424

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai03677
Amount of Each Receipt this Period: 40.00

SUBTOTAL of Receipts This Page (optional) ► 190.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1233 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Tommye D. Taylor

Mailing Address 205 N. 8Th Street

City Murray State KY Zip Code 42071-1936

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03678
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Mr. William Taylor, Jr.

Mailing Address 6115 Avenue T.

City Brooklyn State NY Zip Code 11234-5901

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai03679
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Mons L. Teigen

Mailing Address 19 Clover View Drive

City Helena State MT Zip Code 59601-0252

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 03 / 03 / 2009
Transaction ID: 2009M04L11ai03680
Amount of Each Receipt this Period: 600.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1234 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Kenneth Folsom Tenney

Mailing Address 3307 N.E. 2nd St.

City State Zip Code
Gainesville FL 32609-2334

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Central Fla. Drywall&Plas- Contractor
terin

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai03681

Amount of Each Receipt this Period
2000.00

B.

Full Name (Last, First, Middle Initial)

Mr. John F. Tepe, Sr.

Mailing Address 8396 Maineville Road

City State Zip Code
Maineville OH 45039-8611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lt Enterprises C.E.O.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03682

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)

Mr. John F. Tepe, Sr.

Mailing Address 8396 Maineville Road

City State Zip Code
Maineville OH 45039-8611

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lt Enterprises C.E.O.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai03683

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)

4100.00

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 1235 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Ellen Terrett

Mailing Address 2304 Comstock Street

City State Zip Code
Miles City MT 59301-5073

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03684

Amount of Each Receipt this Period
245.00

B.

Full Name (Last, First, Middle Initial)
Mr. Russell Terry

Mailing Address 2 Wimbledon Drive W.

City State Zip Code
Mobile AL 36608-2378

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03685

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Russell Terry

Mailing Address 2 Wimbledon Drive W.

City State Zip Code
Mobile AL 36608-2378

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03686

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **595.00**

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 1236 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Russell Terry

Mailing Address 2 Wimbledon Drive W.

City State Zip Code
Mobile AL 36608-2378

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **03 / 31 / 2009**

Transaction ID: 2009M04L11ai03687

Amount of Each Receipt this Period **100.00**

B. Full Name (Last, First, Middle Initial)
Mr. Charles B. Tesar

Mailing Address 5105 Pacifica Dr.

City State Zip Code
San Diego CA 92109-1505

FEC ID number of contributing federal political committee. **C**

Name of Employer Sharp Rees-Stealy Medical Group Inc Occupation Doctor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 13 / 2009**

Transaction ID: 2009M04L11ai03688

Amount of Each Receipt this Period **300.00**

C. Full Name (Last, First, Middle Initial)
Ms. Myroslawa Tesluk

Mailing Address 2607 George Avenue

City State Zip Code
Cleveland OH 44134-2988

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 20 / 2009**

Transaction ID: 2009M04L11ai03689

Amount of Each Receipt this Period **100.00**

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 1237 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Carol A. Teter

Mailing Address 85799 Bakers Ridge Road

City State Zip Code
Jewett OH 43986-9765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Harrison Community Hospital Nurse

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03690

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Ms. Sylvia Thacker

Mailing Address 3945 Innsbruck Court

City State Zip Code
Reno NV 89519-0637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03691

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. James Edward Tharp

Mailing Address 5089 S. E. Jack Avenue

City State Zip Code
Stuart FL 34997-6796

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J. Tharp Const. Corp. Carpenter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03692

Amount of Each Receipt this Period
275.00

SUBTOTAL of Receipts This Page (optional) ► 1275.00

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 1238 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. David J. Thayer	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 4415 Holland Avenue Unit A.	Transaction ID: 2009M04L11ai03693
	City State Zip Code Dallas TX 75219-5733	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Bank Of America, Na Svp/Group Operations Mgr	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. George M. Thelen	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 35380 E. Boot Lake Road	Transaction ID: 2009M04L11ai03694
	City State Zip Code Park Rapids MN 56470-4126	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Theodore Theodores	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 50 Shepherds Way	Transaction ID: 2009M04L11ai03695
	City State Zip Code Barnstable MA 02630-1024	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Self-Employed Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	855.00
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 1239 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Theodore Theodores		Date of Receipt	
	Mailing Address 50 Shepherds Way		M M / D D / Y Y Y Y Y 03 / 27 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03696
	Barnstable	MA	02630-1024	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		105.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00		

B.	Full Name (Last, First, Middle Initial) Mr. Peter Thermansen		Date of Receipt	
	Mailing Address 5320 N. Lake Drive		M M / D D / Y Y Y Y Y 03 / 25 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03697
	Milwaukee	WI	53217-5372	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Oethinger Tool		Occupation Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Mrs. Patricia Theyoung		Date of Receipt	
	Mailing Address 11206 Orange Hibiscus Lane		M M / D D / Y Y Y Y Y 03 / 02 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03698
	Palm Beach Gardens	FL	33418-1515	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Homemaker		Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	855.00
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 1240 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Edward E. Thiele

Mailing Address 1704 Laguna Drive

City State Zip Code
Richmond TX 77406-9738

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai03699

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)
Mr. Steven Thode

Mailing Address 5805 Friars Road
Apartment 2209

City State Zip Code
San Diego CA 92110-6018

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.S. Navy Scientist

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03700

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Everett L Thomas, Jr.

Mailing Address 306 Pine Cliff Dr

City State Zip Code
Seneca SC 29672-2233

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 04 / 2009

Transaction ID: 2009M04L11ai03701

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)

1600.00

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 1241 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. K. P. Thomas

Mailing Address 8200 Horseshoe Bend Lane

City State Zip Code
Las Vegas NV 89113-0127

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai03702

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Ms. Karen R. Thomas

Mailing Address 3212 Winter Sun Terrace

City State Zip Code
Oak Hill VA 20171-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer Raytheon Company Occupation Director Human Resources

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	0	9

Transaction ID: 2009M04L11ai03703

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
Mr. Norris Lynwood Thomas, Jr.

Mailing Address 700 N. Dobson Road
Unit 31

City State Zip Code
Chandler AZ 85224-6940

FEC ID number of contributing federal political committee. **C**

Name of Employer Pioneer Equipment, Inc. Occupation President

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	9	/	2	0	0	9

Transaction ID: 2009M04L11ai03704

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 1242 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. W. R. Thomas

Mailing Address P.O. Box 1253

City State Zip Code
Jackson WY 83001-1253

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03705

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. William Daniel Thomas, Jr.

Mailing Address 212 Center Suite 400

City State Zip Code
Little Rock AR 72201-2435

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03706

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. William Daniel Thomas, Jr.

Mailing Address 212 Center Suite 400

City State Zip Code
Little Rock AR 72201-2435

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03707

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1243 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Charles I. Thompson

Mailing Address 475 W. 12Th Avenue
Unit 10A

City State Zip Code
Denver CO 80204-3687

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	2	/	2	0	0	9

Transaction ID: 2009M04L11ai03708
 Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Conrad Thompson

Mailing Address 901 17Th Street Ne

City State Zip Code
Rochester MN 55906-4206

FEC ID number of contributing federal political committee. **C**

Name of Employer Pharmaceutical Specialties Occupation Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	9

Transaction ID: 2009M04L11ai03709
 Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Elisabeth P. Thompson

Mailing Address 2525 Jamestown Lane

City State Zip Code
Montgomery AL 36111-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: 2009M04L11ai03710
 Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1244 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Freida Wilburn Thompson		Date of Receipt MM / DD / YYYY 03 / 23 / 2009		
	Mailing Address 1129 Kelly Road		Transaction ID: 2009M04L11ai03711		
	City Mount Holly	State NC	Zip Code 28120-9308	Amount of Each Receipt this Period 110.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Requested		Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00			

B.	Full Name (Last, First, Middle Initial) Mr. Jimmy Thompson		Date of Receipt MM / DD / YYYY 03 / 13 / 2009		
	Mailing Address P.O. Box 1227		Transaction ID: 2009M04L11ai03712		
	City Clute	State TX	Zip Code 77531-1227	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Cape		Occupation Site Superintendent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00			

C.	Full Name (Last, First, Middle Initial) John Thompson		Date of Receipt MM / DD / YYYY 03 / 30 / 2009		
	Mailing Address 1847 North 150 East		Transaction ID: 2009M04L11ai03713		
	City Centerville	State UT	Zip Code 84014-1039	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	860.00
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 1245 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Judith G. Thompson

Mailing Address 103 Jumento Cay Lane

City State Zip Code
Bonita Springs FL 34134-8504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03714

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Larry Thompson

Mailing Address 1178 Hidden Creek Drive

City State Zip Code
Dripping Springs TX 78620-4634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03715

Amount of Each Receipt this Period
70.00

C. Full Name (Last, First, Middle Initial)
Mr. Larry Thompson

Mailing Address 1178 Hidden Creek Drive

City State Zip Code
Dripping Springs TX 78620-4634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03716

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ► 1175.00

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 1246 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Merrill Thompson

Mailing Address 4688 South Mill Road

City State Zip Code
Carbon IN 47837-8544

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03717

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. William M. Thompson

Mailing Address 5100 John D. Ryan Blvd.
Apartment 634

City State Zip Code
San Antonio TX 78245-3551

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03718

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)
Mr. William M. Thompson

Mailing Address 5100 John D. Ryan Blvd.
Apartment 634

City State Zip Code
San Antonio TX 78245-3551

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03719

Amount of Each Receipt this Period
25.00

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 1247 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Donald Thomson		Date of Receipt																					
	Mailing Address 7101 Fellowship Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	3		2	0	9															
	City State Zip Code Basking Ridge NJ 07920-3911		Transaction ID: 2009M04L11ai03720																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00		<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>		100.00																				
100.00																								

B.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Arthur Thornton		Date of Receipt																					
	Mailing Address 1409 W. Dow Rummel Street Apartment 202		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	6		2	0	9															
	City State Zip Code Sioux Falls SD 57104-7820		Transaction ID: 2009M04L11ai03721																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>		1000.00																				
1000.00																								

C.	Full Name (Last, First, Middle Initial) Mr. Ernest N. Thorp		Date of Receipt																					
	Mailing Address 10834 Irish Row Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	9	
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	5		2	0	9															
	City State Zip Code Clinton IL 61727-9294		Transaction ID: 2009M04L11ai03722																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		<table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table>		100.00																				
100.00																								

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>1200.00</td></tr></table>	1200.00
1200.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td> </td></tr></table>	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1248 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Thomas A. Thorson
Mailing Address P.O. Box 9
City Mills State WY Zip Code 82644-0009
FEC ID number of contributing federal political committee. **C**
Name of Employer Black Hills Benton Occupation Mining
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai03723
Amount of Each Receipt this Period 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas A. Thorson
Mailing Address P.O. Box 9
City Mills State WY Zip Code 82644-0009
FEC ID number of contributing federal political committee. **C**
Name of Employer Black Hills Benton Occupation Mining
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai03724
Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven E. Thresher
Mailing Address 394 Park St.
City Uniontown State PA Zip Code 15401-2181
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 19 / 2009
Transaction ID: 2009M04L11ai03725
Amount of Each Receipt this Period 100.00

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 1249 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Roy Thronson

Mailing Address 2366 Miramonte Circle E.
Unit A.

City State Zip Code
Palm Springs CA 92264-5738

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03726

Amount of Each Receipt this Period
110.00

B.

Full Name (Last, First, Middle Initial)
Mr. Roy Thronson

Mailing Address 2366 Miramonte Circle E.
Unit A.

City State Zip Code
Palm Springs CA 92264-5738

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03727

Amount of Each Receipt this Period
55.00

C.

Full Name (Last, First, Middle Initial)
Mr. Jeffrey E Tickle

Mailing Address 2222 Edgemont Avenue

City State Zip Code
Bristol TN 37620-4727

FEC ID number of contributing federal political committee. **C**

Name of Employer Bristol Tennessee City Schools Occupation Teacher

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03728

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► 215.00

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 1250 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Barbara N. Tidball

Mailing Address P.O. Box 308

City State Zip Code
Ellison Bay WI 54210-0308

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai03729

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Bruce J. Tifeld

Mailing Address 22401 Hillside Avenue
Apartment 1F

City State Zip Code
Queens Village NY 11427-2002

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03730

Amount of Each Receipt this Period
35.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bruce J. Tifeld

Mailing Address 22401 Hillside Avenue
Apartment 1F

City State Zip Code
Queens Village NY 11427-2002

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03731

Amount of Each Receipt this Period
30.00

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: (check only one)	PAGE 1251 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Bruce J. Tifeld	Date of Receipt MM / DD / YYYY 03 / 13 / 2009
	Mailing Address 22401 Hillside Avenue Apartment 1F	Transaction ID: 2009M04L11ai03732
	City State Zip Code Queens Village NY 11427-2002	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

B.	Full Name (Last, First, Middle Initial) Mr. Bruce J. Tifeld	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 22401 Hillside Avenue Apartment 1F	Transaction ID: 2009M04L11ai03733
	City State Zip Code Queens Village NY 11427-2002	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) Mr. Bruce J. Tifeld	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 22401 Hillside Avenue Apartment 1F	Transaction ID: 2009M04L11ai03734
	City State Zip Code Queens Village NY 11427-2002	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Requested Occupation Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional)	90.00
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 1252 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Bruce J. Tifeld

Mailing Address 22401 Hillside Avenue
Apartment 1F

City State Zip Code
Queens Village NY 11427-2002

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai03735

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Mr. Bruce J. Tifeld

Mailing Address 22401 Hillside Avenue
Apartment 1F

City State Zip Code
Queens Village NY 11427-2002

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03736

Amount of Each Receipt this Period
30.00

C.

Full Name (Last, First, Middle Initial)
Mr. Bruce J. Tifeld

Mailing Address 22401 Hillside Avenue
Apartment 1F

City State Zip Code
Queens Village NY 11427-2002

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03737

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional) ► **90.00**

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 1253 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. George H. Tilghman

Mailing Address 4 Bassett Creek Trail N.

City State Zip Code
Hobe Sound FL 33455-2231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai03738

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Ms. Patricia A. Todd

Mailing Address 655 Weller Drive

City State Zip Code
Mount Airy MD 21771-3440

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03739

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert S. Todd

Mailing Address 130 Honeysuckle Drive

City State Zip Code
Township Of Washin NJ 07676-5215

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 260.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03740

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1254 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Rm. Bill Toellner

Mailing Address 2402 Park Lane Drive

City Woodward State OK Zip Code 73801-6331

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 18 / 2009
Transaction ID: 2009M04L11ai03741
Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Kevin Edward Toevs

Mailing Address P.O. Box 491

City Odenton State MD Zip Code 21113-0491

FEC ID number of contributing federal political committee. **C**

Name of Employer D.D.K. Technology Group, Inc. Occupation Program Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03742
Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
Mr. Kevin Edward Toevs

Mailing Address P.O. Box 491

City Odenton State MD Zip Code 21113-0491

FEC ID number of contributing federal political committee. **C**

Name of Employer D.D.K. Technology Group, Inc. Occupation Program Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt: 03 / 18 / 2009
Transaction ID: 2009M04L11ai03743
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 1255 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Bernard E. Tofany		Date of Receipt		
	Mailing Address 100 Hahnemann Trail Apartment 211		M M / D D / Y Y Y Y 03 / 02 / 2009		
	City Pittsford	State NY	Zip Code 14534-2351	Transaction ID: 2009M04L11ai03744	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00		
	Name of Employer Retired	Occupation Retired		Aggregate Year-to-Date 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

B.	Full Name (Last, First, Middle Initial) Dr. Giles D. Toll		Date of Receipt		
	Mailing Address 1037 Cottonwood Circle		M M / D D / Y Y Y Y 03 / 20 / 2009		
	City Golden	State CO	Zip Code 80401-1794	Transaction ID: 2009M04L11ai03745	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00		
	Name of Employer Retired	Occupation Retired		Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

C.	Full Name (Last, First, Middle Initial) Mr. Donald C. Tomasso		Date of Receipt		
	Mailing Address 9508 Purcell Drive		M M / D D / Y Y Y Y 03 / 23 / 2009		
	City Potomac	State MD	Zip Code 20854-4542	Transaction ID: 2009M04L11ai03746	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00		
	Name of Employer Wakefield Capital	Occupation Exec Vive Chairman		Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

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 1256 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. James & Maxine Tomer

Mailing Address 21826 26Th Street E.

City Lake Tapps State WA Zip Code 98391-5640

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai03747
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Gail Tomlinson

Mailing Address P.O. Box 3701

City Olympic Valley State CA Zip Code 96146

FEC ID number of contributing federal political committee. **C**

Name of Employer Ret. Occupation Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai03748
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Ginnie Tomlinson

Mailing Address 2401A Waterman Blvd.
Suite 4-122

City Fairfield State CA Zip Code 94534-1800

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai03749
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1257 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Frederick A. Tompkins

Mailing Address 10 Brookview Drive
P.O. Box 63

City State Zip Code
Derry NH 03038-0063

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 19 / 2009
Transaction ID: 2009M04L11ai03750
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Giles Toole, Jr.

Mailing Address 3375 Capital Circle N.E.

City State Zip Code
Tallahassee FL 32308-1532

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 03 / 17 / 2009
Transaction ID: 2009M04L11ai03751
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Giles Toole, Jr.

Mailing Address 3375 Capital Circle N.E.

City State Zip Code
Tallahassee FL 32308-1532

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai03752
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 1258 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. David B. Toothman	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 301 W. Main Street Suite 311	Transaction ID: 2009M04L11ai03753
	City Ardmore State OK Zip Code 73401-6322	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00	

B.	Full Name (Last, First, Middle Initial) Mr. David B. Toothman	Date of Receipt MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 301 W. Main Street Suite 311	Transaction ID: 2009M04L11ai03754
	City Ardmore State OK Zip Code 73401-6322	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00	

C.	Full Name (Last, First, Middle Initial) Mr. David B. Toothman	Date of Receipt MM / DD / YYYY 03 / 17 / 2009
	Mailing Address 301 W. Main Street Suite 311	Transaction ID: 2009M04L11ai03755
	City Ardmore State OK Zip Code 73401-6322	Amount of Each Receipt this Period 45.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 255.00	

SUBTOTAL of Receipts This Page (optional)	135.00
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 1259 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Carolyn Topping

Mailing Address 4333 S.E. Seattle Slew Drive

City Lees Summit State MO Zip Code 64082-4938

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 226.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai03756

Amount of Each Receipt this Period 61.00

B. Full Name (Last, First, Middle Initial)
Mrs. Vivienne A. Topping

Mailing Address 1482 Country Lake Estates Drive

City Chesterfield State MO Zip Code 63005-4347

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009

Transaction ID: 2009M04L11ai03757

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Willard Tormaschy

Mailing Address 819 8Th Avenue W.

City Dickinson State ND Zip Code 58601-3708

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai03758

Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) ► 596.00

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 1260 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Willard Tormaschy

Mailing Address 819 8Th Avenue W.

City State Zip Code
Dickinson ND 58601-3708

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai03759

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
Ms. Vinney Torres

Mailing Address 67-27 Harrow Street

City State Zip Code
Forest Hills NY 11375-4123

FEC ID number of contributing federal political committee. **C**

Name of Employer Wang Law Office, Plc.	Occupation Paralegal
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03760

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)
Mr. George C. Tostevin

Mailing Address 12555 37Th Avenue N.E.

City State Zip Code
Seattle WA 98125-4654

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03761

Amount of Each Receipt this Period

105.00

SUBTOTAL of Receipts This Page (optional)

305.00

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 1261 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. George C. Tostevin

Mailing Address 12555 37Th Avenue N.E.

City State Zip Code
Seattle WA 98125-4654

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai03762

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. George C. Tostevin

Mailing Address 12555 37Th Avenue N.E.

City State Zip Code
Seattle WA 98125-4654

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03763

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Jesus M. Tovar

Mailing Address 2261 East 27Th Way

City State Zip Code
Yuma AZ 85365-3280

FEC ID number of contributing federal political committee. **C**

Name of Employer T. & P. Farms, Inc. Occupation Agriculture

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03764

Amount of Each Receipt this Period
300.00

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 1262 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James Townsend

Mailing Address 4195 St. Catherine Rd.

City State Zip Code
Bellevue IA 52031-9551

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03765

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Daniel J. Towslee

Mailing Address P.O. Box 69

City State Zip Code
Woodinville WA 98072

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Pacland Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03766

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Trevor D. Traina

Mailing Address 2780 Broadway Street

City State Zip Code
San Francisco CA 94115-1105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03767

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 1263 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Ms. Ann Gordon Trammell

Mailing Address 4605 Post Oak Place Dr.
 Suite 270

City State Zip Code
 Houston TX 77027-9745

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Self-Employed Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2009

Transaction ID: 2009M04L11ai03768

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
 Ms. Patricia F. Travis

Mailing Address 3110 Battersea Lane

City State Zip Code
 Alexandria VA 22309-2104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Pitney Bowes Vice President Of Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 260.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2009

Transaction ID: 2009M04L11ai03769

Amount of Each Receipt this Period
 260.00

C. Full Name (Last, First, Middle Initial)
 Mr. David Treinen

Mailing Address 13505 Eagle Run Drive

City State Zip Code
 Omaha NE 68164-2481

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 West Corporation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2009

Transaction ID: 2009M04L11ai03770

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional) ► **1010.00**

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 1264 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Harold J. Trepagnier, Sr.
Mailing Address 6217 Kingston Road

City State Zip Code
Oklahoma City OK 73122-7601

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai03771
Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial)
Col. Louis B. Trevathan, U.S.A. (Re
Mailing Address 12000 N. 90Th Street
Apartment 1022

City State Zip Code
Scottsdale AZ 85260-8628

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai03772
Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
Mrs. Joan S. Trew hitt
Mailing Address 8 Oakhill Drive

City State Zip Code
Woodside CA 94062-4253

FEC ID number of contributing federal political committee. **C**

Name of Employer Wastech, Inc. Occupation Corporate Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai03773
Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

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 1265 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Ethan L. Trexler		Date of Receipt
	Mailing Address 1 Reading Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 06 / 2009
	City	State	Zip Code
	Wernersville	PA	19565-2018
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03774
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Peter Treyer		Date of Receipt
	Mailing Address 2432 Oak Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	Northbrook	IL	60062-5222
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03775
Name of Employer Sterling Fire Restoration, Ltd.		Occupation Vice President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00
		<input type="text"/> 450.00	

C.	Full Name (Last, First, Middle Initial) Ms Vivian Triplett		Date of Receipt
	Mailing Address 3529 Valleycrest Trl.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 23 / 2009
	City	State	Zip Code
	Trussville	AL	35173-5198
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03776
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00
		<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 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 1266 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) C. Trospen	Date of Receipt MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 110 West Van Buren Street Room 303	Transaction ID: 2009M04L11ai03777
	City State Zip Code Colorado Springs CO 80907-6713	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Occupation Investements Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

B.	Full Name (Last, First, Middle Initial) Mr. Lawrence S. Troum	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 1945 Gulf Of Mexico Dr. Unit 208	Transaction ID: 2009M04L11ai03778
	City State Zip Code Longboat Key FL 34228-3349	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

C.	Full Name (Last, First, Middle Initial) Mr. Robert Trout	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 520 Galer Street #300	Transaction ID: 2009M04L11ai03779
	City State Zip Code Seattle WA 98109-3387	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	2250.00
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 1267 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Ray Kent Troutman		Date of Receipt
	Mailing Address 6337 Klamath Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	Fort Worth	TX	76116-1617
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03780
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 300.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Marcia Trudeau		Date of Receipt
	Mailing Address 8304 E. Woodland Park Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 16 / 2009
	City	State	Zip Code
	Spokane	WA	99217-9228
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03781
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. John Truitt		Date of Receipt
	Mailing Address 7656 Pillion Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2009
	City	State	Zip Code
	Delaware	OH	43015-8327
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03782
Name of Employer Tesa, Inc		Occupation Manufacturers Agent	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 850.00
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 1268 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Joseph C. Trusina

Mailing Address 1706 Winding Willow Dr.

City State Zip Code
Trinity FL 34655-7141

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai03783

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Martha A. Trussell

Mailing Address P. O. Box 2168

City State Zip Code
Columbus OH 43216-2168

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai03784

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Oran J. Tsakopoulos

Mailing Address 902 Persian Garden

City State Zip Code
San Antonio TX 78260-6658

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested
Mass Mutual Financial Planner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03785

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 900.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1269 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Che S. Tsao	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 1213 Forestwood Drive	Transaction ID: 2009M04L11ai03786
	City State Zip Code Mc Lean VA 22101-2603	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Vivian C. H. Tse	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 955 Park Avenue	Transaction ID: 2009M04L11ai03787
	City State Zip Code New York NY 10028-0321	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Mrs. Vivian C. H. Tse	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 955 Park Avenue	Transaction ID: 2009M04L11ai03788
	City State Zip Code New York NY 10028-0321	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1270 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Anne M Tuchek
Mailing Address 421 Westminster Drive
City Burr Ridge State IL Zip Code 60527-8338
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2009
Transaction ID: 2009M04L11ai03789
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. F. L. Tucker
Mailing Address 2304 Harmony Lane
City Hoover State AL Zip Code 35226-2406
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00
Date of Receipt 03 / 10 / 2009
Transaction ID: 2009M04L11ai03790
Amount of Each Receipt this Period 275.00

C. Full Name (Last, First, Middle Initial)
Mr. William W. Tucker
Mailing Address 4554 Devonshire Rd.
City Atlanta State GA Zip Code 30338-5601
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai03791
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 775.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1271 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David F. Tufaro

Mailing Address 1817 Thames Street

City Baltimore State MD Zip Code 21231-3510

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai03792

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Charles Tull

Mailing Address 3738 Cypress Club Drive
Apartment D205

City Charlotte State NC Zip Code 28210-2490

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 13 / 2009

Transaction ID: 2009M04L11ai03793

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael F. Turansick

Mailing Address 47 Carlyle Lane

City Buffalo Grove State IL Zip Code 60089-1135

FEC ID number of contributing federal political committee. **C**

Name of Employer Fragomen Del Rey Bernsen Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 03 / 11 / 2009

Transaction ID: 2009M04L11ai03794

Amount of Each Receipt this Period 275.00

SUBTOTAL of Receipts This Page (optional) ▶ 625.00

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 1272 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert J. Turnberger		Date of Receipt
	Mailing Address 7 Lynn Court		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Wilmington	State DE	Zip Code 19808-4978
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03795
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	<input type="text" value="110.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. C R Turner		Date of Receipt
	Mailing Address 3320 Herb Ct		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Loveland	State CO	Zip Code 80537
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03796
Name of Employer Requested		Occupation Requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Eddie W Turner		Date of Receipt
	Mailing Address 3605 Rivers Call Blvd..		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Atlanta	State GA	Zip Code 30339-8502
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03797
Name of Employer Abm Industries, Inc.		Occupation Senior Advisor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1360.00"/>
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 1273 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Michael C. Turner

Mailing Address 86 Cumberland Drive

City Bluffton State SC Zip Code 29910-4820

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai03798
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul M. Turner, Jr.

Mailing Address 251 Andrew Lane

City Canton State NC Zip Code 28716-5823

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03799
Amount of Each Receipt this Period: 220.00

C. Full Name (Last, First, Middle Initial)
Ms. Abigail S. Turpin

Mailing Address 1620 Locust Ave Ste 1

City Fairmont State WV Zip Code 26554

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 ▼ 305.00

Date of Receipt: 03 / 20 / 2009
Transaction ID: 2009M04L11ai03800
Amount of Each Receipt this Period: 305.00

SUBTOTAL of Receipts This Page (optional) ► 775.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1274 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Mark C. Turrentine

Mailing Address 2166 Kurtz Road

City State Zip Code
Holly MI 48442-8382

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03801

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Dr. Eric L. Tweedie

Mailing Address 345 Herman Melville Ave.

City State Zip Code
Newport News VA 23606-2959

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03802

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Carl Scott Twichell, II

Mailing Address 6604 La Manga Drive

City State Zip Code
Dallas TX 75248-2946

FEC ID number of contributing federal political committee. **C**

Name of Employer Howard's Tractor Company Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03803

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1275 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. & Mrs. Jerry D. Twiggs		Date of Receipt
	Mailing Address 1803 Boulder Springs Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 19 / 2009
	City	State	Zip Code
	Saint George	UT	84790-8517
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03804
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) Mr. Charles Tyler		Date of Receipt
	Mailing Address 2713 Fox Glenn Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 06 / 2009
	City	State	Zip Code
	Hurst	TX	76054-2786
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03805
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 210.00	

C.	Full Name (Last, First, Middle Initial) Mr. William M Tynes		Date of Receipt
	Mailing Address 5362 East Division		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 27 / 2009
	City	State	Zip Code
	Springfield	MO	65802-9262
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03806
Name of Employer Springfield Grocer Company		Occupation Business Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 350.00
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 1276 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Mike D. Tyrholm	Date of Receipt MM / DD / YYYY 03 / 02 / 2009
	Mailing Address 3703 Collier Lane	Transaction ID: 2009M04L11ai03807
	City State Zip Code Klamath Falls OR 97603-9644	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Mike D. Tyrholm	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 3703 Collier Lane	Transaction ID: 2009M04L11ai03808
	City State Zip Code Klamath Falls OR 97603-9644	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Steve Uhlmann	Date of Receipt MM / DD / YYYY 03 / 17 / 2009
	Mailing Address 11401 E. Bella Vista Drive	Transaction ID: 2009M04L11ai03809
	City State Zip Code Scottsdale AZ 85259-5813	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	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 1277 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Miss Ruth E. Ullom

Mailing Address 501 Chisholm Trail

City State Zip Code
Cincinnati OH 45215-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03810

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Miss Ruth E. Ullom

Mailing Address 501 Chisholm Trail

City State Zip Code
Cincinnati OH 45215-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai03811

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
Miss Ruth E. Ullom

Mailing Address 501 Chisholm Trail

City State Zip Code
Cincinnati OH 45215-2517

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 2009M04L11ai03812

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 1278 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. J. C. Ulmer, Jr.
Mailing Address P. O. Box 6

City State Zip Code
Elloree SC 29047-0006

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 351.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03813

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Shirley Umphenour
Mailing Address 104 Dorothy Street

City State Zip Code
Lakehills TX 78063-6741

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai03814

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Ms. Shirley Umphenour
Mailing Address 104 Dorothy Street

City State Zip Code
Lakehills TX 78063-6741

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai03815

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: PAGE 1279 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Shirley Umphenour

Mailing Address 104 Dorothy Street

City State Zip Code
Lakehills TX 78063-6741

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03816

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Earl J. Underbrink

Mailing Address 712 Kenyon Road
Apartment 309

City State Zip Code
Fort Dodge IA 50501-5791

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03817

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven J. Underriter

Mailing Address 12223 Murdo Court

City State Zip Code
Bristow VA 20136-1942

FEC ID number of contributing federal political committee. **C**

Name of Employer E.W.A., Inc. Occupation Analyst

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai03818

Amount of Each Receipt this Period
50.00

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 1280 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Steven J. Underriter		Date of Receipt																					
	Mailing Address 12223 Murdo Court		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	5		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	5		2	0	0	9														
	City State Zip Code Bristow VA 20136-1942		Transaction ID: 2009M04L11ai03819																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: E.W.A., Inc. Occupation: Analyst Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 205.00		50.00																						

B.	Full Name (Last, First, Middle Initial) Mr. Calvin K. Upp		Date of Receipt																					
	Mailing Address 212 N. Elm Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	0		2	0	0	9														
	City State Zip Code Wellington KS 67152-2937		Transaction ID: 2009M04L11ai03820																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		25.00																						

C.	Full Name (Last, First, Middle Initial) Ms. Barbara Ann Upton		Date of Receipt																					
	Mailing Address 2820 P. Street N. W.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	6		2	0	0	9														
	City State Zip Code Washington DC 20007-3066		Transaction ID: 2009M04L11ai03821																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Self-Employed Occupation: Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		250.00																						

SUBTOTAL of Receipts This Page (optional)	325.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1281 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stanley W. Urban, Jr.
Mailing Address 66 Terrace Dr.
City Fruitland Park State FL Zip Code 34731-6392
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 03 / 18 / 2009
Transaction ID: 2009M04L11ai03822
Amount of Each Receipt this Period: 35.00

Name of Employer Requested: Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 205.00

B. Full Name (Last, First, Middle Initial)
Mr. Stanley W. Urban, Jr.
Mailing Address 66 Terrace Dr.
City Fruitland Park State FL Zip Code 34731-6392
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai03823
Amount of Each Receipt this Period: 25.00

Name of Employer Requested: Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 205.00

C. Full Name (Last, First, Middle Initial)
Mr. Richard P. Urfer
Mailing Address 64 Blue Mill Road
City Morristown State NJ Zip Code 07960-6714
FEC ID number of contributing federal political committee. **C**

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai03824
Amount of Each Receipt this Period: 250.00

Name of Employer Requested: B. W. Capital Markets, Inc. Occupation Requested: Investment Banker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date: 250.00

SUBTOTAL of Receipts This Page (optional) ► **310.00**

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 1282 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Glen Urquhart

Mailing Address 4 East Lake Drive

City State Zip Code
Rehoboth Beach DE 19971-2927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Urquhart & Co Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai03825

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Glen Urquhart

Mailing Address 4 East Lake Drive

City State Zip Code
Rehoboth Beach DE 19971-2927

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Urquhart & Co Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai03826

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. John Uttech

Mailing Address P.O. Box 496

City State Zip Code
Watertown WI 53094-0496

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Wisconsin Pak, Inc. Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
03 / 18 / 2009

Transaction ID: 2009M04L11ai03827

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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 1283 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. William J. Utterback

Mailing Address 1700 E. 20Th Avenue

City State Zip Code
Winfield KS 67156-1605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03828

Amount of Each Receipt this Period
110.00

B.

Full Name (Last, First, Middle Initial)

Mr. William J. Utterback

Mailing Address 1700 E. 20Th Avenue

City State Zip Code
Winfield KS 67156-1605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 245.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai03829

Amount of Each Receipt this Period
25.00

C.

Full Name (Last, First, Middle Initial)

Mr. Francis P. Valenti, Jr.

Mailing Address 2501 Commerce Drive

City State Zip Code
Libertyville IL 60048-2495

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Chicago Tag & Label, Inc. Manufacturer Business

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03830

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ▶

1135.00

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 1284 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. John A. Valentino

Mailing Address 4044 Costa Mesa Lane

City State Zip Code
Rockledge FL 32955-5382

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03831

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Jay P. Valentyn

Mailing Address 430 Western Avenue Sw

City State Zip Code
Faribault MN 55021-5645

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03832

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert R. Vallee

Mailing Address 623 Stolp Avenue

City State Zip Code
Syracuse NY 13207-1227

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03833

Amount of Each Receipt this Period
50.00

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 1285 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert R. Vallee

Mailing Address 623 Stolp Avenue

City State Zip Code
Syracuse NY 13207-1227

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 2009M04L11ai03834

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. John J. Valloric

Mailing Address 2010 N. Brandywine Street

City State Zip Code
Arlington VA 22207-2213

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai03835

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. John J. Valloric

Mailing Address 2010 N. Brandywine Street

City State Zip Code
Arlington VA 22207-2213

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 2009M04L11ai03836

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: PAGE 1286 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Joan T. Valts

Mailing Address 961 E. Tennis Avenue

City State Zip Code
Amblers PA 19002-2312

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Valts Roofing, Inc. Bookkeeper

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03837

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Ms. Helen R. Van Buren

Mailing Address 2929 Buffalo Speedway
Unit 912

City State Zip Code
Houston TX 77098-1708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Houston Independent School District School Administrator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03838

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
Mr. John R. Van Cora

Mailing Address 134 Barbados Drive

City State Zip Code
Jupiter FL 33458-2913

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Weston Portfolio Group, L.L.C. Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai03839

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1287 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Carl Van Demark
Mailing Address 189 Valley Road
City State Zip Code
Katonah NY 10536-1712
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Gloenbock Eiseman Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03840
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
Mr. Carl Van Demark
Mailing Address 189 Valley Road
City State Zip Code
Katonah NY 10536-1712
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Gloenbock Eiseman Attorney
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai03841
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Henry Van Klaveren
Mailing Address 5900 Woodland Avenue
City State Zip Code
Modesto CA 95358-9523
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai03842
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1288 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Col. Richard E. Van Ness

Mailing Address 1 Keahole Place
Apartment 1618

City Honolulu State HI Zip Code 96825-3422

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 12 / 2009
Transaction ID: 2009M04L11ai03843
Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Col. Richard E. Van Ness

Mailing Address 1 Keahole Place
Apartment 1618

City Honolulu State HI Zip Code 96825-3422

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai03844
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Gerrit Van Ommering

Mailing Address 11545 Newmont Court

City Gold River State CA Zip Code 95670-7716

FEC ID number of contributing federal political committee. **C**

Name of Employer Spece Systems Loral Occupation Director, R&D

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai03845
Amount of Each Receipt this Period 250.00

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 1289 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Tim L. Van Solkema	Date of Receipt MM / DD / YYYY 03 / 09 / 2009
	Mailing Address 2645 Blackhawk Road	Transaction ID: 2009M04L11ai03846
	City State Zip Code Wilmette IL 60091-1257	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Morgan Keegan Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Kendrick VanPelt	Date of Receipt MM / DD / YYYY 03 / 18 / 2009
	Mailing Address 315 Great Smokey Mountain Drive	Transaction ID: 2009M04L11ai03847
	City State Zip Code Mebane NC 27302-7143	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert Vanas	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 918 Four Seasons Drive	Transaction ID: 2009M04L11ai03848
	City State Zip Code Wayne NJ 07470-1949	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	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 1290 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stuart P. Vance

Mailing Address P.O. Box 733

City Starkville State MS Zip Code 39760-0733

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai03849

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Ronald Vandenberghe

Mailing Address P.O. Box 490

City Danville State CA Zip Code 94526-3229

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03850

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald A. Vander Noot

Mailing Address 3950 Scenic Ridge
Apartment 230

City Traverse City State MI Zip Code 49684-3907

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03851

Amount of Each Receipt this Period: 50.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1291 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Donald A. Vander Noot

Mailing Address 3950 Scenic Ridge
Apartment 230

City State Zip Code
Traverse City MI 49684-3907

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai03852

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
Mr. Donald A. Vander Noot

Mailing Address 3950 Scenic Ridge
Apartment 230

City State Zip Code
Traverse City MI 49684-3907

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03853

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mr. Harry P. Vanderborgh

Mailing Address 90 Division Avenue

City State Zip Code
West Sayville NY 11796-1302

FEC ID number of contributing federal political committee. **C**

Name of Employer Sayville Ferry Service Occupation Mechanic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai03854

Amount of Each Receipt this Period
150.00

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 1292 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Harry P. Vanderborgh

Mailing Address 90 Division Avenue

City State Zip Code
West Sayville NY 11796-1302

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Sayville Ferry Service Mechanic

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03855

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Ms. Gertrude K. Vandermark

Mailing Address 431 E. State Road

City State Zip Code
Seneca PA 16346-3223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03856

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Gertrude K. Vandermark

Mailing Address 431 E. State Road

City State Zip Code
Seneca PA 16346-3223

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03857

Amount of Each Receipt this Period
50.00

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 1293 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. & Mrs. Henry & Anna Vanderpol

Mailing Address 1402 Auburb Way N.
 P.M.B. 435

City Auburn State WA Zip Code 98002-3384

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai03858
 Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
 Mr. Tom Vandervort

Mailing Address 212 Powder House Blvd # 1

City Somerville State MA Zip Code 02144-1531

FEC ID number of contributing federal political committee. **C**

Name of Employer Delttek, Inc Occupation Product Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03859
 Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
 Dr. Lodewyk H. Vanmierop

Mailing Address 2130 S.W. 43Rd Place

City Gainesville State FL Zip Code 32608-4082

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt: 03 / 05 / 2009
Transaction ID: 2009M04L11ai03860
 Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1294 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Lodewyk H. Vanmierop	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 2130 S.W. 43Rd Place	Transaction ID: 2009M04L11ai03861
	City State Zip Code Gainesville FL 32608-4082	Amount of Each Receipt this Period 165.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00	

B.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Wilson & Gigi Varghese	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 919 Canberra Road	Transaction ID: 2009M04L11ai03862
	City State Zip Code Lafayette LA 70503-5957	Amount of Each Receipt this Period 105.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Alpha Automobile Sales, L. L. C.	Occupation Business Car Dealership	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	

C.	Full Name (Last, First, Middle Initial) Joe Barb Vasquez	Date of Receipt MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 121 Leather Leaf Lane	Transaction ID: 2009M04L11ai03863
	City State Zip Code Lebanon OH 45036-7711	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Ret.	Occupation Ret.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	770.00
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 1295 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Joe Vaughan		Date of Receipt	
	Mailing Address 12221 Merit Drive Suite 1200		M M / D D / Y Y Y Y 03 / 20 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03864
	Dallas	TX	75251-3129	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer E. P. C. O.		Occupation Oil & Gas		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

B.	Full Name (Last, First, Middle Initial) Col. Nicolas Vay		Date of Receipt	
	Mailing Address 77 E. Missouri Avenue Unit 20		M M / D D / Y Y Y Y 03 / 10 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03865
	Phoenix	AZ	85012-1380	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		25.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00		

C.	Full Name (Last, First, Middle Initial) Mr. Stephen G. Veale		Date of Receipt	
	Mailing Address 712 Meadow Field Court		M M / D D / Y Y Y Y 03 / 31 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03866
	Mount Airy	MD	21771-5666	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer Bechtel Power Corp.		Occupation Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	▶	625.00
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 1296 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Tinkham Veale

Mailing Address P.O. Box 39

City State Zip Code
Gates Mills OH 44040-0039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 305.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 6 / 2 0 0 9

Transaction ID: 2009M04L11ai03867

Amount of Each Receipt this Period
305.00

B.

Full Name (Last, First, Middle Initial)

Ms. Graciela Vela-Cuellar

Mailing Address 5110 San Felipe Street
Unit 263W

City State Zip Code
Houston TX 77056-3666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 875.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 0 9

Transaction ID: 2009M04L11ai03868

Amount of Each Receipt this Period
75.00

C.

Full Name (Last, First, Middle Initial)

Ms. Graciela Vela-Cuellar

Mailing Address 5110 San Felipe Street
Unit 263W

City State Zip Code
Houston TX 77056-3666

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 875.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: 2009M04L11ai03869

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶

430.00

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 1297 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Graciela Vela-Cuellar

Mailing Address 5110 San Felipe Street
Unit 263W

City Houston State TX Zip Code 77056-3666

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 875.00

Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai03870
Amount of Each Receipt this Period 750.00

B. Full Name (Last, First, Middle Initial)
Jeffrey & Janelle Verhey

Mailing Address 933 13Th Avenue S.E.

City Minot State ND Zip Code 58701-2708

FEC ID number of contributing federal political committee. **C**

Name of Employer Trinity Health Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai03871
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. John A. Verhoff

Mailing Address 145 E. Hartsdale Avenue
Apartment 2A

City Hartsdale State NY Zip Code 10530-3306

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai03872
Amount of Each Receipt this Period 90.00

SUBTOTAL of Receipts This Page (optional) ► 1090.00

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 1298 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. George C. Vernet

Mailing Address 89 Parsonage Lane

City State Zip Code
Topsfield MA 01983-1321

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Real Estate

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai03873

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Florentino Versoza

Mailing Address 2215 Tannler Drive

City State Zip Code
West Linn OR 97068-4102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Hefferman Insurance Broke- Vice President

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03874

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Phillip Vetter

Mailing Address 8404 N. 75Th Street

City State Zip Code
Scottsdale AZ 85258-2779

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai03875

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

750.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1299 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Jack T. Viele	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 4900 Telegraph Road #127	Transaction ID: 2009M04L11ai03876
	City State Zip Code Ventura CA 93003-4131	Amount of Each Receipt this Period 10.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00	

B.	Full Name (Last, First, Middle Initial) Mr. Jack T. Viele	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 4900 Telegraph Road #127	Transaction ID: 2009M04L11ai03877
	City State Zip Code Ventura CA 93003-4131	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00	

C.	Full Name (Last, First, Middle Initial) Mr. Francis T. Vincent, Jr.	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 145 Sago Palm Road	Transaction ID: 2009M04L11ai03878
	City State Zip Code Vero Beach FL 32963-3702	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	1260.00
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 1300 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 John C. & Cheryl Vincent
 Mailing Address 1604 Hollow Way Lane

City State Zip Code
 Quinlan TX 75474-2834

FEC ID number of contributing federal political committee. **C**

Name of Employer L3 Communications Occupation Senior Quality Control Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai03879
 Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
 John C. & Cheryl Vincent
 Mailing Address 1604 Hollow Way Lane

City State Zip Code
 Quinlan TX 75474-2834

FEC ID number of contributing federal political committee. **C**

Name of Employer L3 Communications Occupation Senior Quality Control Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 03 / 16 / 2009
Transaction ID: 2009M04L11ai03880
 Amount of Each Receipt this Period: 50.00

C. Full Name (Last, First, Middle Initial)
 Mrs. Lucille Vincent
 Mailing Address 536 Forest Lawn Road

City State Zip Code
 Webster NY 14580-1064

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai03881
 Amount of Each Receipt this Period: 110.00

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 1301 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert C. Vincent

Mailing Address P.O. Box 7340

City Amarillo State TX Zip Code 79114-7340

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 03 / 17 / 2009
Transaction ID: 2009M04L11ai03882
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Dr. Charles E. Virgin

Mailing Address 2700 S.W. 3rd Avenue Suite 1B

City Miami State FL Zip Code 33129-2430

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai03883
 Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Ms. Miriam Virgin

Mailing Address 260 Hemlock Street

City Broomfield State CO Zip Code 80020-2209

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 03 / 2009
Transaction ID: 2009M04L11ai03884
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1302 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Michael Viva Las Vegas

Mailing Address 29 Ridgewood Drive

City State Zip Code
San Rafael CA 94901-1153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United Markets Checker At Grocery Store

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai03885

Amount of Each Receipt this Period
240.00

B.

Full Name (Last, First, Middle Initial)
Mr. Michael Viva Las Vegas

Mailing Address 29 Ridgewood Drive

City State Zip Code
San Rafael CA 94901-1153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United Markets Checker At Grocery Store

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai03886

Amount of Each Receipt this Period
160.00

C.

Full Name (Last, First, Middle Initial)
Mr. Michael Viva Las Vegas

Mailing Address 29 Ridgewood Drive

City State Zip Code
San Rafael CA 94901-1153

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
United Markets Checker At Grocery Store

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 560.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03887

Amount of Each Receipt this Period
160.00

SUBTOTAL of Receipts This Page (optional) ▶

560.00

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 1303 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Elizabeth Vizzone		Date of Receipt	
	Mailing Address 159 Gates Avenue		M M / D D / Y Y Y Y 03 / 13 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03888
	Montclair	NJ	07042-2006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Cool Cheeks Inc.		Occupation Billing Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

B.	Full Name (Last, First, Middle Initial) Mr. Eric M. Vogel		Date of Receipt	
	Mailing Address 42 Blueberry Lane		M M / D D / Y Y Y Y 03 / 12 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03889
	Shelton	CT	06484-3750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Southwest Airlines		Occupation Pilot		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Kenneth & Joan E. Voges		Date of Receipt	
	Mailing Address 11118 Ost Road		M M / D D / Y Y Y Y 03 / 20 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03890
	Red Bud	IL	62278-4224	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1304 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
 Mr. Olaf T. Von Ramm

Mailing Address 4718 Harmony Church Road

City State Zip Code
 Efland NC 27243-9383

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Duke University Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2009

Transaction ID: 2009M04L11ai03891

Amount of Each Receipt this Period
 250.00

B.

Full Name (Last, First, Middle Initial)
 Mr. Barnabas F. Vorreiter

Mailing Address 3605 W. Hidden Lane
 Unit 304

City State Zip Code
 Rolling Hills Esta CA 90274-4190

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Caltrans Civil Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2009

Transaction ID: 2009M04L11ai03892

Amount of Each Receipt this Period
 50.00

C.

Full Name (Last, First, Middle Initial)
 Mr. Alfred F. Wade

Mailing Address 2970 Mendon Road
 Apartment 170

City State Zip Code
 Cumberland RI 02864-8503

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 09 / 2009

Transaction ID: 2009M04L11ai03893

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional) ► **320.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1305 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Alfred F. Wade	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 2970 Mendon Road Apartment 170	Transaction ID: 2009M04L11ai03894
	City State Zip Code Cumberland RI 02864-8503	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00

B.	Full Name (Last, First, Middle Initial) Mr. Alfred F. Wade	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 2970 Mendon Road Apartment 170	Transaction ID: 2009M04L11ai03895
	City State Zip Code Cumberland RI 02864-8503	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00

C.	Full Name (Last, First, Middle Initial) Mrs. Nicole Wade	Date of Receipt MM / DD / YYYY 03 / 17 / 2009
	Mailing Address 123 Peachtree Circle NE	Transaction ID: 2009M04L11ai03896
	City State Zip Code Atlanta GA 30309-3204	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Power Goldstein L.L.P Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00

SUBTOTAL of Receipts This Page (optional)	▶	295.00
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 1306 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Penelope Wadkins

Mailing Address 6002 Kettering Court

City State Zip Code
Dallas TX 75248-2137

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03897

Amount of Each Receipt this Period
220.00

B. Full Name (Last, First, Middle Initial)
Mr. Paul M. Waggoner

Mailing Address 600 E. 73Rd Avenue

City State Zip Code
Hutchinson KS 67502-9753

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Waggoners Inc. Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai03898

Amount of Each Receipt this Period
120.00

C. Full Name (Last, First, Middle Initial)
Mr. James A. Wagner

Mailing Address 4372 42Nd Street S.W.

City State Zip Code
Grandville MI 49418-2311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
03 / 25 / 2009

Transaction ID: 2009M04L11ai03899

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **540.00**

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 1307 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Michael W. Wagner		Date of Receipt
	Mailing Address 1824 W. Blue Ridge Way		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Chandler	AZ	85248-5413
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03900
		Amount of Each Receipt this Period	<input type="text" value="1000.00"/>
Name of Employer R.A.P.I., Ltd.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>

B.	Full Name (Last, First, Middle Initial) Mrs. Carole Wakeman		Date of Receipt
	Mailing Address 611 W. Hermosa Drive		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Fullerton	CA	92835-1405
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03901
		Amount of Each Receipt this Period	<input type="text" value="250.00"/>
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Kenneth C. Waldo, Jr.		Date of Receipt
	Mailing Address 1000 Deerfield Road		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Raleigh	NC	27609-5429
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai03902
		Amount of Each Receipt this Period	<input type="text" value="200.00"/>
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="650.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1450.00"/>
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 1308 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Kenneth C. Waldo, Jr.
Mailing Address 1000 Deerfield Road

City Raleigh State NC Zip Code 27609-5429

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 03 / 24 / 2009
Transaction ID: 2009M04L11ai03903
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Allan Walker
Mailing Address 2436 21st St.

City Great Bend State KS Zip Code 67530-2433

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt 03 / 18 / 2009
Transaction ID: 2009M04L11ai03904
Amount of Each Receipt this Period 180.00

C. Full Name (Last, First, Middle Initial)
Mr. Kenneth O. Walker
Mailing Address 7975 Spiritwood Court

City Cincinnati State OH Zip Code 45243-1332

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2009
Transaction ID: 2009M04L11ai03905
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 680.00

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 1309 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert M. Walker

Mailing Address 56 Sutherland Drive

City Atherton State CA Zip Code 94027-6430

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 04 / 2009
Transaction ID: 2009M04L11ai03906
 Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Ronald Walker

Mailing Address 11 Blind Brook Lane

City Greenwich State CT Zip Code 06831-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03907
 Amount of Each Receipt this Period: 400.00

C. Full Name (Last, First, Middle Initial)
Mr. Ronald Walker

Mailing Address 11 Blind Brook Lane

City Greenwich State CT Zip Code 06831-3202

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai03908
 Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1310 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. S. G. Walker

Mailing Address 7300 Westland Drive

City State Zip Code
Knoxville TN 37919-7439

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03909

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mrs. Sharon Walker

Mailing Address 4775 Wright Bridge Road

City State Zip Code
Cumming GA 30028-7977

FEC ID number of contributing federal political committee. **C**

Name of Employer Commercial Custom Concepts, Inc. Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2009

Transaction ID: 2009M04L11ai03910

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Phyllis Walker-Long

Mailing Address 77-401 Puu Wai Alii Pl.

City State Zip Code
Kailua-Kona HI 96740

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai03911

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **800.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1311 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James B. Wallace

Mailing Address 475 17Th Street
Suite 1300

City State Zip Code
Denver CO 80202-4024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	9

Transaction ID: 2009M04L11ai03912

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Kevin Wallace

Mailing Address P.O. Box 23218

City State Zip Code
Macon GA 31212-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J.B. Hunt Transport Truck Driver

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 243.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	0	9

Transaction ID: 2009M04L11ai03913

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
Mr. Kevin Wallace

Mailing Address P.O. Box 23218

City State Zip Code
Macon GA 31212-3218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
J.B. Hunt Transport Truck Driver

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 243.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	4	/	2	0	0	9

Transaction ID: 2009M04L11ai03914

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **1040.00**

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 1312 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Kevin Wallace		Date of Receipt
	Mailing Address P.O. Box 23218		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Macon	GA	31212-3218
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03915
Name of Employer J.B. Hunt Transport		Occupation Truck Driver	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="243.00"/>	<input type="text" value="20.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Kevin Wallace		Date of Receipt
	Mailing Address P.O. Box 23218		<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Macon	GA	31212-3218
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03916
Name of Employer J.B. Hunt Transport		Occupation Truck Driver	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="243.00"/>	<input type="text" value="20.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Michael J. Wallace		Date of Receipt
	Mailing Address 945 Melvin Road		<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Annapolis	MD	21403-1315
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03917
Name of Employer Constellation Energy		Occupation Energy Executive	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="15100.00"/>	<input type="text" value="15000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="15040.00"/>
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 1313 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Maj. Gen. Stewart Wallace

Mailing Address 60901 E Rock Ledge Loop

City Tucson State AZ Zip Code 85739-1969

FEC ID number of contributing federal political committee. **C**

Name of Employer M. P. R. I. Inc. Occupation Business Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai03918

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard C. Walling

Mailing Address 700 Mill Creek Road

City Gladwyne State PA Zip Code 19035-1521

FEC ID number of contributing federal political committee. **C**

Name of Employer Express Marine, Inc. Occupation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 03 / 11 / 2009

Transaction ID: 2009M04L11ai03919

Amount of Each Receipt this Period 2500.00

C. Full Name (Last, First, Middle Initial)
Ms. Sallyann Walsh

Mailing Address 173 Dillon Tree Hill Ridge Road

City Darien State CT Zip Code 06820

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai03920

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 2850.00

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 1314 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Hoyt D. Walter

Mailing Address 3640 Fox Run Drive

City Allentown State PA Zip Code 18103-9207

FEC ID number of contributing federal political committee. **C**

Name of Employer Service Electric Cablevision Occupation Business Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 10 / 2009

Transaction ID: 2009M04L11ai03921

Amount of Each Receipt this Period 350.00

B. Full Name (Last, First, Middle Initial)
Mr. John C. Walter

Mailing Address 9601 W. Tulip Drive

City Columbus State IN Zip Code 47201-8423

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 05 / 2009

Transaction ID: 2009M04L11ai03922

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Mr. Nunnaloy Walters

Mailing Address 4263 Ridgeway Drive

City Duluth State GA Zip Code 30097-2315

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 13 / 2009

Transaction ID: 2009M04L11ai03923

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 1315 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William B. Walters

Mailing Address 4612 Amherst Road

City State Zip Code
College Park MD 20740-3624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
University Of Maryland Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai03924

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
Mrs. Diane A. Wamberg

Mailing Address 7 Fox Hunt Road

City State Zip Code
Barrington Hills IL 60010-9603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai03925

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Major George E. Ward, Jr.

Mailing Address 4681B 4 Season Terrace #308

City State Zip Code
Glen Allen VA 23060

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03926

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1316 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Major George E. Ward, Jr.
Mailing Address 4681B 4 Season Terrace #308

City State Zip Code
Glen Allen VA 23060

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03927

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. James J. Ward
Mailing Address 11 Mendonshire Road

City State Zip Code
Honeoye Falls NY 14472-9719

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03928

Amount of Each Receipt this Period
180.00

C. Full Name (Last, First, Middle Initial)
Mrs. Kelly Ward
Mailing Address 1105 N. 6Th Avenue

City State Zip Code
Laurel MS 39440-2714

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03929

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ▶ **480.00**

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 1317 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Capt. Marshall D. Ward
Mailing Address 3229 28Th Street

City State Zip Code
San Diego CA 92104-4504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Ret.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	9

Transaction ID: 2009M04L11ai03930

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Capt. Marshall D. Ward
Mailing Address 3229 28Th Street

City State Zip Code
San Diego CA 92104-4504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Ret.

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: 2009M04L11ai03931

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. James George Wardy
Mailing Address 3939 S. Peardale Drive

City State Zip Code
Lafayette CA 94549-2823

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Comstock Capital Sales

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	9

Transaction ID: 2009M04L11ai03932

Amount of Each Receipt this Period
500.00

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 1318 / 1945
(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
							17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Stephen J. Wargo

Mailing Address 1220 Upper Stump Road

City Chalfont State PA Zip Code 18914-1010

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai03933

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Mrs. Janet B. Waring

Mailing Address 8737 Aintree Lane

City Burr Ridge State IL Zip Code 60527-8391

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 04 / 2009

Transaction ID: 2009M04L11ai03934

Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Dr. & Mrs. John H. Warner, Jr.

Mailing Address P.O. Box 2929

City La Jolla State CA Zip Code 92038-2929

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai03935

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1319 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. & Mrs. Richard B. Warner

Mailing Address 3 North 618 Trotter Lane

City State Zip Code
 Saint Charles IL 60175

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 05 / 2009

Transaction ID: 2009M04L11ai03936

Amount of Each Receipt this Period
 200.00

B. Full Name (Last, First, Middle Initial)
 Mr. Robert Warren

Mailing Address 369 Mockingbird Lane

City State Zip Code
 Heber Springs AR 72543-7959

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 23 / 2009

Transaction ID: 2009M04L11ai03937

Amount of Each Receipt this Period
 90.00

C. Full Name (Last, First, Middle Initial)
 Mr. Richard E. Washburn

Mailing Address 3208 Santee Drive

City State Zip Code
 Murrells Inlet SC 29576-8222

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 16 / 2009

Transaction ID: 2009M04L11ai03938

Amount of Each Receipt this Period
 300.00

SUBTOTAL of Receipts This Page (optional) ► **590.00**

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 1320 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. Chris J. Washko

Mailing Address 1950 Fox Mountain Point

City Colorado Springs State CO Zip Code 80906-6909

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 10 / 2009
Transaction ID: 2009M04L11ai03939
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
 Ms. Linda Waska

Mailing Address P.O. Box 755

City Sapulpa State OK Zip Code 74067-0755

FEC ID number of contributing federal political committee. **C**

Name of Employer Becco Contractors, Inc. Occupation Office Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 05 / 2009
Transaction ID: 2009M04L11ai03940
 Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
 Ms. Helen Waterman

Mailing Address 40 Loeffler Road Talcott 210

City Bloomfield State CT Zip Code 06002-2262

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai03941
 Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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 1321 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. John Waters	Date of Receipt MM / DD / YYYY 03 / 25 / 2009
	Mailing Address 49-0 Jackson Lake Road	Transaction ID: 2009M04L11ai03942
	City State Zip Code Chatsworth GA 30705-5155	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: United Minerals and Properties, Inc. Occupation: Minerals Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) Mrs. Mary Watkins	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 1870 Bridle Ridge Trace	Transaction ID: 2009M04L11ai03943
	City State Zip Code Roswell GA 30075-2151	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: Homemaker Occupation: Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Ms. Barbara R. Watson	Date of Receipt MM / DD / YYYY 03 / 26 / 2009
	Mailing Address P.O. Box 8	Transaction ID: 2009M04L11ai03944
	City State Zip Code Easley SC 29641-0008	Amount of Each Receipt this Period 230.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer: None Occupation: Artist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 510.00	

SUBTOTAL of Receipts This Page (optional)	3230.00
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 1322 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Bruce & Lydia Watson

Mailing Address 12228 Willingdon Road

City State Zip Code
Huntersville NC 28078-5652

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai03945

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Mr. George A. Watson

Mailing Address 427 Grove Road

City State Zip Code
Prosperity PA 15329-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Micon Mining Contracting

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai03946

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Paul M. Watson

Mailing Address 31656 Sea Level Drive

City State Zip Code
Malibu CA 90265-2634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 0 / 2 0 0 9

Transaction ID: 2009M04L11ai03948

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

1050.00

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 1323 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert C. Watson

Mailing Address 1140 5Th Avenue

City State Zip Code
New York NY 10128-0806

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Lyster Watson & Company Investment Advisor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03949

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Robert G. Watt

Mailing Address 4170 Whitewater Creek Road N.W.

City State Zip Code
Atlanta GA 30327-3945

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai03950

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Steven R. Waymel

Mailing Address 1819 Denver West Drive #26-400

City State Zip Code
Golden CO 80401-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Truckload Management Service Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03951

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 850.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1324 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Steven R. Waymel

Mailing Address 1819 Denver West Drive #26-400

City State Zip Code
Golden CO 80401-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Truckload Management Service Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03952

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
Mr. Lonnie Clark Weatherby

Mailing Address 1463 Springleaf Circle S.E.

City State Zip Code
Smyrna GA 30080-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Disabled Disabled

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03953

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
Mr. Lonnie Clark Weatherby

Mailing Address 1463 Springleaf Circle S.E.

City State Zip Code
Smyrna GA 30080-2403

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Disabled Disabled

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai03954

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional) ► **295.00**

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 1325 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Malcolm H. Weathers, III

Mailing Address 2420 Surrey Lane S. E.

City State Zip Code
Decatur AL 35601-6902

FEC ID number of contributing federal political committee. **C**

Name of Employer Radiology Group P. A. Occupation Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 03 / 17 / 2009
Transaction ID: 2009M04L11ai03955
Amount of Each Receipt this Period: 350.00

B. Full Name (Last, First, Middle Initial)
Mr. Lynn A. Weaver

Mailing Address 338 E. Meadow Drive

City State Zip Code
Mechanicsburg PA 17055-5187

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai03956
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Mrs. Lyndis Webb

Mailing Address 2300 West Chico Lane

City State Zip Code
Yuma AZ 85365-3804

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai03957
Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1850.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1326 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert I. Webb

Mailing Address 2630 Anthony Court

City Easton State PA Zip Code 18045-5287

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A Occupation Ret.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1515.00

Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai03958
 Amount of Each Receipt this Period 1500.00

B. Full Name (Last, First, Middle Initial)
Roy Webb

Mailing Address 327 Whispering Hills

City Hot Springs State AR Zip Code 71901

FEC ID number of contributing federal political committee. **C**

Name of Employer Genesis Cancer Center Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 27 / 2009
Transaction ID: 2009M04L11ai03959
 Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Thomas L. Webb

Mailing Address 9030 W. Sahara Avenue

City Las Vegas State NV Zip Code 89117-1902

FEC ID number of contributing federal political committee. **C**

Name of Employer The Webb Agency, Inc. Occupation Insurance Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai03960
 Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00

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 1327 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Zane Webb

Mailing Address 5814 Republic Of Texas Blvd

City State Zip Code
Austin TX 78735-6317

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Texas Department Of Transportation Engineer Director

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai03961

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Greg & Sherry Webster

Mailing Address 30226 E. Legends Trail Dr.

City State Zip Code
Spring TX 77386-3004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Faith Mfg. Inc. Owner

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03962

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. William C. Webster

Mailing Address P.O. Box 526

City State Zip Code
Cantonment FL 32533-0526

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai03963

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

850.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1328 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Jeff Wedge		Date of Receipt MM / DD / YYYY 03 / 26 / 2009		
	Mailing Address 7629 River Ranch Way		Transaction ID: 2009M04L11ai03964		
	City Sacramento	State CA	Zip Code 95831-4426	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer Requested		Occupation Sales Executive			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

B.	Full Name (Last, First, Middle Initial) Ms. Kisa E. Weeman		Date of Receipt MM / DD / YYYY 03 / 30 / 2009		
	Mailing Address 1500 Riffel Road		Transaction ID: 2009M04L11ai03965		
	City Wooster	State OH	Zip Code 44691-8504	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer Ret.		Occupation Physician			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) Mr. Johnny Ray Weems		Date of Receipt MM / DD / YYYY 03 / 09 / 2009		
	Mailing Address 141 Oak Drive		Transaction ID: 2009M04L11ai03966		
	City Muscle Shoals	State AL	Zip Code 35661-4012	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
Name of Employer Requested		Occupation Requested			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1329 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert N. Weichbrodt		Date of Receipt	
	Mailing Address 920-C Masters Row Apartment C.		M M / D D / Y Y Y Y Y 03 / 11 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03967
	Glen Allen	VA	23059-7431	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer U. S. D. A. Rus		Occupation Public Utilities Specialist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

B.	Full Name (Last, First, Middle Initial) Mrs. Rachel N. Weidman		Date of Receipt	
	Mailing Address 949 Deforest Road		M M / D D / Y Y Y Y Y 03 / 27 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03968
	Coppell	TX	75019-2740	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) Mrs. Pauline M. Weigle		Date of Receipt	
	Mailing Address 3200 Baker Circle Unit A217		M M / D D / Y Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai03969
	Adamstown	MD	21710-9672	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		600.00	
Name of Employer Homemaker		Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00		

SUBTOTAL of Receipts This Page (optional)	▶	950.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1330 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Karl M. Weiler

Mailing Address P.O. Box 234

City State Zip Code
Buck Hill Falls PA 18323-0234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Weller Corporation Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03970

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Kurt J. Weis

Mailing Address W248N5550 Executive Drive

City State Zip Code
Sussex WI 53089-4380

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Requested
Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai03971

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Weisberger

Mailing Address 1697 Brookwood Drive

City State Zip Code
Akron OH 44313-5065

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation Retired
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai03972

Amount of Each Receipt this Period
1200.00

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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 1331 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Tom Weitzenkamp

Mailing Address 116 County Road 19

City State Zip Code
Hooper NE 68031-2160

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai03973

Amount of Each Receipt this Period
275.00

B. Full Name (Last, First, Middle Initial)
Mrs. Janet D. Welch

Mailing Address 19725 Schutte Farm Raod

City State Zip Code
Corcoran MN 55340

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2009

Transaction ID: 2009M04L11ai03974

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. John C. Wellemeyer

Mailing Address 89 Rosedale Road

City State Zip Code
Princeton NJ 08540-6701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai03975

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► 1375.00

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 1332 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Francis R. Welles

Mailing Address 106 Wee Loch Drive

City Cary State NC Zip Code 27511-3885

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11ai03976
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Jessie K. Wells

Mailing Address 296 Canterbury Road
Apartment D.

City Bel Air State MD Zip Code 21014-9006

FEC ID number of contributing federal political committee. **C**

Name of Employer Housewife Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 19 / 2009
Transaction ID: 2009M04L11ai03977
Amount of Each Receipt this Period 60.00

C. Full Name (Last, First, Middle Initial)
Mr. John G. Wells

Mailing Address 1769 Rosecrest Drive

City Salt Lake City State UT Zip Code 84108-2641

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 03 / 23 / 2009
Transaction ID: 2009M04L11ai03978
Amount of Each Receipt this Period 270.00

SUBTOTAL of Receipts This Page (optional) ▶ 830.00

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 1333 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. LaVerne Wells

Mailing Address 2012 Garst Cir.

City Boone State IA Zip Code 50036-4450

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 206.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai03979

Amount of Each Receipt this Period 105.00

B. Full Name (Last, First, Middle Initial)
Dr. William Welsh

Mailing Address 7624 Painter Avenue Suite 100

City Whittier State CA Zip Code 90602-2327

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 405.00

Date of Receipt 03 / 17 / 2009

Transaction ID: 2009M04L11ai03980

Amount of Each Receipt this Period 205.00

C. Full Name (Last, First, Middle Initial)
Dr. Stephen T. Welton

Mailing Address 447 N. Ingram Road

City Sikeston State MO Zip Code 63801-5151

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 03 / 20 / 2009

Transaction ID: 2009M04L11ai03981

Amount of Each Receipt this Period 220.00

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 1334 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Mary J. Welty

Mailing Address 8126 Cross Country Dr.

City State Zip Code
Humble TX 77346-6114

FEC ID number of contributing federal political committee. **C**

Name of Employer: Open Solutions, Inc. Occupation: Computer Programming Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 05 / 2009
Transaction ID: 2009M04L11ai03982
 Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard Wendorf

Mailing Address 173 Albert Lane

City State Zip Code
Port Charlotte FL 33954-3705

FEC ID number of contributing federal political committee. **C**

Name of Employer: Forsberg Construction Inc. Occupation: Contractor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 24 / 2009
Transaction ID: 2009M04L11ai03983
 Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Donald L. Wenger

Mailing Address P.O. Box 183

City State Zip Code
Sabetha KS 66534-0183

FEC ID number of contributing federal political committee. **C**

Name of Employer: Self-Employed Occupation: Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt: 03 / 12 / 2009
Transaction ID: 2009M04L11ai03984
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1335 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Dr. Peter Wenig		Date of Receipt																					
	Mailing Address 3713 Nottingham Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	6		2	0	0	9														
	City State Zip Code Joplin MO 64804-6046		Transaction ID: 2009M04L11ai03985																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Southwest Radiology Occupation Radilologist Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		100.00																						

B.	Full Name (Last, First, Middle Initial) Ms. Amy M. Wenn		Date of Receipt																					
	Mailing Address 512 Harrogate Road		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	3		2	0	0	9														
	City State Zip Code Matthews NC 28105-2640		Transaction ID: 2009M04L11ai03986																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Carolinas Health Care System Occupation Registered Nurse Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		500.00																						

C.	Full Name (Last, First, Middle Initial) Mr. Wolfgang Wenzlawe		Date of Receipt																					
	Mailing Address 39165 Cypress Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	2		2	0	0	9														
	City State Zip Code Clinton Township MI 48036-1819		Transaction ID: 2009M04L11ai03987																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		50.00																						

SUBTOTAL of Receipts This Page (optional)	▶	650.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1336 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Wolfgang Wenzlawe	Date of Receipt MM / DD / YYYY 03 / 10 / 2009
	Mailing Address 39165 Cypress Street	Transaction ID: 2009M04L11ai03988
	City State Zip Code Clinton Township MI 48036-1819	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) Mr. Wolfgang Wenzlawe	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 39165 Cypress Street	Transaction ID: 2009M04L11ai03989
	City State Zip Code Clinton Township MI 48036-1819	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-Employed Occupation Self-Employed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00	

C.	Full Name (Last, First, Middle Initial) Mr. Jacques Alan Wertheimier	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 10101 Angelo View Drive	Transaction ID: 2009M04L11ai03990
	City State Zip Code Beverly Hills CA 90210-2038	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00	

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: (check only one)	PAGE 1337 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Stephen E. Wesley		Date of Receipt
	Mailing Address 19019 West Piney Point Avenue		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Baton Rouge	LA	70817-2736
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03991
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) Mrs. Lea West		Date of Receipt
	Mailing Address 23403 Holly Hollow		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Tomball	TX	77377-3686
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03992
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Milton West		Date of Receipt
	Mailing Address 8800 Woodway Drive Apartment 14		<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77063-2300
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai03993
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2250.00"/>
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 1338 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Ray West

Mailing Address 3107 Metz Drive

City Midland	State TX	Zip Code 79705-4825
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai03994

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Barbara R. Westbrook

Mailing Address 2991 Hardman Court N.E.

City Atlanta	State GA	Zip Code 30305-3424
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Westbrook Interiors	Occupation Designer
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai03995

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Barbara R. Westbrook

Mailing Address 2991 Hardman Court N.E.

City Atlanta	State GA	Zip Code 30305-3424
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Westbrook Interiors	Occupation Designer
---	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai03996

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 1339 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. H. Martin Westfall
Mailing Address 467 Retreat Lane N.
City Powell State OH Zip Code 43065-7609
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 05 / 2009
Transaction ID: 2009M04L11ai03997
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Jack Westfall
Mailing Address 21481 S. Ferguson Road
City Beavercreek State OR Zip Code 97004-7615
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1080.00
Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai03998
Amount of Each Receipt this Period 360.00

C. Full Name (Last, First, Middle Initial)
Ms. Lorraine Westley
Mailing Address 8900 River Ridge Road
City Bloomington State MN Zip Code 55425-2181
FEC ID number of contributing federal political committee. **C**
Name of Employer Requested Occupation Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 03 / 02 / 2009
Transaction ID: 2009M04L11ai03999
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 960.00
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 1340 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Lorraine Westley

Mailing Address 8900 River Ridge Road

City State Zip Code
Bloomington MN 55425-2181

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai04000

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Thomas L. Whaley

Mailing Address P.O. Box P.

City State Zip Code
Marshall TX 75671-0320

FEC ID number of contributing federal political committee. **C**

Name of Employer Logan & Whately Occupation Insurance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai04001

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Thomas L. Whaley

Mailing Address P.O. Box P.

City State Zip Code
Marshall TX 75671-0320

FEC ID number of contributing federal political committee. **C**

Name of Employer Logan & Whately Occupation Insurance

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai04002

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)

2100.00

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 1341 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Ken Wheat		Date of Receipt																					
	Mailing Address 4327 Ivy Hall Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	3		2	0	0	9														
	City State Zip Code Columbia SC 29206-1224		Transaction ID: 2009M04L11ai04003																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00																						
Name of Employer Boyd Management Inc. Partner		Occupation Real Estate Management																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00																						

B.	Full Name (Last, First, Middle Initial) Mrs. Diane Wheatley		Date of Receipt																					
	Mailing Address 12088 E. Ida Circle		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	9		2	0	0	9														
	City State Zip Code Englewood CA 80111		Transaction ID: 2009M04L11ai04004																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00																						
Name of Employer Requested		Occupation Requested																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00																						

C.	Full Name (Last, First, Middle Initial) Mr. C. R. Wheatly, Jr.		Date of Receipt																					
	Mailing Address 719 Front Street		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	4		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	4		2	0	0	9														
	City State Zip Code Beaufort NC 28516-2229		Transaction ID: 2009M04L11ai04005																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00																						
Name of Employer Self-Employed		Occupation Self-Employed																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00																						

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 1342 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. David K. Wheeler

Mailing Address P.O. Box 611

City State Zip Code
Cottage Grove OR 97424-0026

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai04006

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Mr. David K. Wheeler

Mailing Address P.O. Box 611

City State Zip Code
Cottage Grove OR 97424-0026

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai04007

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. David K. Wheeler

Mailing Address P.O. Box 611

City State Zip Code
Cottage Grove OR 97424-0026

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai04008

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1343 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Annelle R. White

Mailing Address 5929 Saint Andrews Drive

City State Zip Code
Dallas TX 75205-1727

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 09 / 2009
Transaction ID: 2009M04L11ai04009
Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
Mr. Barry F. White

Mailing Address 5877 Brierfield Ave.

City State Zip Code
Memphis TN 38120-2309

FEC ID number of contributing federal political committee. **C**

Name of Employer Farris Matthews Law Firm Occupation Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 04 / 2009
Transaction ID: 2009M04L11ai04010
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Dr. James Lee White

Mailing Address 2576 Fallen Leaf Lane

City State Zip Code
Charlottesville VA 22901-5224

FEC ID number of contributing federal political committee. **C**

Name of Employer Uva Occupation Associate Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt: 03 / 06 / 2009
Transaction ID: 2009M04L11ai04011
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1050.00

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 1344 / 1945
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Keith White

Mailing Address 7735 Fairview Rd.

City State Zip Code
Houston TX 77041-2113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Advanced Property Services Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai04012

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Richard Matthew White

Mailing Address 342 E. Warren Avenue

City State Zip Code
Longwood FL 32750-4271

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai04013

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Mrs. Sandra A. White

Mailing Address 38 Eagle Creek Drive

City State Zip Code
Norwalk OH 44857-8852

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai04014

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 2750.00

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 1345 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Todd A White

Mailing Address 2 Bardion Ln

City Harrison State NY Zip Code 10528-1508

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai04015

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Ms. Mildred Whitehurst

Mailing Address 1601 43Rd Street N.
Apartment 110

City St. Petersburg State FL Zip Code 33713-4600

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai04016

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
Mr. Billy Whiteside

Mailing Address 9331 Rosner Drive

City Lenexa State KS Zip Code 66219-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai04017

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 550.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1346 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Billy Whiteside

Mailing Address 9331 Rosner Drive

City Lenexa State KS Zip Code 66219-2215

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 03 / 23 / 2009

Transaction ID: 2009M04L11ai04018

Amount of Each Receipt this Period 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Stuart H. Whitlock

Mailing Address 101 Orange Street

City Nantucket State MA Zip Code 02554-0035

FEC ID number of contributing federal political committee. **C**

Name of Employer Opperheimer & Company Occupation Sales

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 11 / 2009

Transaction ID: 2009M04L11ai04019

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Paul Whitmire

Mailing Address 22405 59Th Avenue West

City Mountlake Terrace State WA Zip Code 98043-3701

FEC ID number of contributing federal political committee. **C**

Name of Employer Boeing Company Occupation Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 12 / 2009

Transaction ID: 2009M04L11ai04020

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 550.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1347 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Sam E. Whittington

Mailing Address 1191 Brookfield Road

City State Zip Code
Memphis TN 38119-5007

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 6 / 2 0 0 9

Transaction ID: 2009M04L11ai04021

Amount of Each Receipt this Period
75.00

B.

Full Name (Last, First, Middle Initial)
Mr. David G. Whorton

Mailing Address 1646 Stanford Avenue

City State Zip Code
Menlo Park CA 94025-5757

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tugboat Entrepreneur

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: 2009M04L11ai04022

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. William F. Wichers

Mailing Address 4211 Deer Run

City State Zip Code
Casper WY 82601-6014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Requested Requested

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 3 / 2 0 0 9

Transaction ID: 2009M04L11ai04023

Amount of Each Receipt this Period
250.00

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 1348 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Nann Alix Wickwire Magrill

Mailing Address 1522 Deer Run Road

City State Zip Code
Mountain City TN 37683-4070

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2009

Transaction ID: 2009M04L11ai04024

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Mrs. Joann Wiedenhofer

Mailing Address 2633 S.W. Conch Cove Lane

City State Zip Code
Palm City FL 34990-2821

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 04 / 2009

Transaction ID: 2009M04L11ai04025

Amount of Each Receipt this Period
105.00

C. Full Name (Last, First, Middle Initial)
Mrs. Joann Wiedenhofer

Mailing Address 2633 S.W. Conch Cove Lane

City State Zip Code
Palm City FL 34990-2821

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai04026

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) ▶ **510.00**

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 1349 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Col. Michael H. Wieland

Mailing Address 1800 Riviera Lane

City State Zip Code
O'Fallon IL 62269-6696

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 370.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai04027

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)

Mr. Peter Wielinga

Mailing Address 3924 Willowood Road

City State Zip Code
Martinez GA 30907-2432

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai04028

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)

Mr. Herve N Wiener

Mailing Address 31 Glenwood Av

City State Zip Code
New Rochelle NY 10801-3601

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Westchester County, Ny Technician

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: 2009M04L11ai04029

Amount of Each Receipt this Period
250.00

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 1350 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. John Wiggins

Mailing Address 2305 Brwig Road

City State Zip Code
Spring Hope NC 27882-9111

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai04030

Amount of Each Receipt this Period
30.00

B.

Full Name (Last, First, Middle Initial)
Mr. John Wiggins

Mailing Address 2305 Brwig Road

City State Zip Code
Spring Hope NC 27882-9111

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai04031

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Mr. John Wiggins

Mailing Address 2305 Brwig Road

City State Zip Code
Spring Hope NC 27882-9111

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai04032

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **130.00**

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 1351 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. & Mrs. Mark Wihl

Mailing Address 34669 Brichetto Court

City State Zip Code
Tracy CA 95377-9357

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai04033

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Elmer D. Wilcox

Mailing Address 919 109Th Avenue N.E.
Apartment 1201

City State Zip Code
Bellevue WA 98004-4496

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai04034

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mark Wilkes

Mailing Address 971 W Fm 303

City State Zip Code
Meadow TX 79345

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ai04035

Amount of Each Receipt this Period
500.00

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 1352 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard Wilkey
Mailing Address 5112 State Road 83
City Hartland State WI Zip Code 53029-9306
FEC ID number of contributing federal political committee. **C**
Name of Employer Fisher Barton Inc. Occupation Manufacturing
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai04036
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Jo A Wilks
Mailing Address 2511 County Rd 169
City Cisco State TX Zip Code 76437
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 03 / 2009
Transaction ID: 2009M04L11ai04037
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. & Mrs. James W. Will
Mailing Address 2707 Garfield Road
City Tacoma State WA Zip Code 98403-2919
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai04038
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1353 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Mr. Verne M. Willaman
 Mailing Address 1535 Wild Rye Way
 City Arroyo Grande State CA Zip Code 93420-4935
 Date of Receipt MM / DD / YYYY 03 / 03 / 2009
Transaction ID: 2009M04L11ai04039
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

B. Full Name (Last, First, Middle Initial)
 Mr. Gene Willard
 Mailing Address 30372 Blue Heron St
 City Denham Springs State LA Zip Code 70726-1791
 Date of Receipt MM / DD / YYYY 03 / 06 / 2009
Transaction ID: 2009M04L11ai04040
 Amount of Each Receipt this Period 75.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Sandpoint Leasing, Llc Occupation Landman
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

C. Full Name (Last, First, Middle Initial)
 Mr. Bennie W. Williams
 Mailing Address 5068 Lerch Drive
 City Shady Side State MD Zip Code 20764-9652
 Date of Receipt MM / DD / YYYY 03 / 09 / 2009
Transaction ID: 2009M04L11ai04041
 Amount of Each Receipt this Period 300.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Retired Occupation Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

SUBTOTAL of Receipts This Page (optional) ► **625.00**

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 1354 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. David A. Williams

Mailing Address 690 Spring Lake Drive

City State Zip Code
Pearl MS 39208-6645

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Horne, L.L.P. C.P.A.

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: 2009M04L11ai04042

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Dr. David Joe Williams

Mailing Address 620 N. Lamar Blvd.

City State Zip Code
Oxford MS 38655-3208

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai04043

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Forrest D. Williams

Mailing Address 4870 Mayde Court

City State Zip Code
Fairfax VA 22030-6618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
S.A.I.C. Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai04044

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

800.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1355 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. George Williams		Date of Receipt
	Mailing Address 517 Sunset Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 03 / 2009
	City	State	Zip Code
	Bay St. Louis	MS	39520-2816
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai04045
		Amount of Each Receipt this Period	<input type="text"/> 300.00
Name of Employer Isle Of Capri Casinos, Inc.		Occupation Sr. Dir Govt Relations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

B.	Full Name (Last, First, Middle Initial) Mr. Harold B. Williams		Date of Receipt
	Mailing Address 2070 McKain Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 02 / 2009
	City	State	Zip Code
	Calabasas	CA	91302-2317
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai04046
		Amount of Each Receipt this Period	<input type="text"/> 100.00
Name of Employer Self-Employed		Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

C.	Full Name (Last, First, Middle Initial) Mr. Harold B. Williams		Date of Receipt
	Mailing Address 2070 McKain Street		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 10 / 2009
	City	State	Zip Code
	Calabasas	CA	91302-2317
	FEC ID number of contributing federal political committee.		Transaction ID: 2009M04L11ai04047
		Amount of Each Receipt this Period	<input type="text"/> 200.00
Name of Employer Self-Employed		Occupation Self-Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 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: PAGE 1356 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Jo Williams

Mailing Address 4017 Resthaven Road

City State Zip Code
High Point NC 27265

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5981.14

Date of Receipt

M M / D D / Y Y Y Y
03 / 09 / 2009

Transaction ID: 2009M04L11ai04048

Amount of Each Receipt this Period

5981.14

B.

Full Name (Last, First, Middle Initial)
Mrs. Joan W. Williams

Mailing Address 1629 Panorama Drive

City State Zip Code
Birmingham AL 35216-3703

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L11ai04049

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
Ms. Judy Williams

Mailing Address P.O. Box 1286

City State Zip Code
Odessa TX 79760-1286

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 20 / 2009

Transaction ID: 2009M04L11ai04050

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

6481.14

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 1357 / 1945
(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
							17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert P. Williams

Mailing Address 369 Jackson Hill Rd.

City Middlefield State CT Zip Code 06455-1290

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: 2009M04L11ai04051
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mr. Ted Williamson, Jr.

Mailing Address P.O. Box 178
New Mexico 262

City Milnesand State NM Zip Code 88125

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai04052
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
Mr. David Willis

Mailing Address 2301 Lucretia Ct.

City Sanford State FL Zip Code 32771-4603

FEC ID number of contributing federal political committee. **C**

Name of Employer Ccmc Inc. Occupation Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: 2009M04L11ai04053
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 400.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1358 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. David Willis

Mailing Address 2301 Lucretia Ct.

City Sanford State FL Zip Code 32771-4603

FEC ID number of contributing federal political committee. **C**

Name of Employer Ccmc Inc. Occupation Software Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai04054
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Mr. Gar C. Willis

Mailing Address 134 Phanturn Lane

City Bellaire State TX Zip Code 77401-2607

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Geologist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ai04055
Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Dr. K. Dean Willis

Mailing Address 2504 Cranfield Road S.E.

City Owens Cross Roads State AL Zip Code 35763-9396

FEC ID number of contributing federal political committee. **C**

Name of Employer Alabama Pain Center Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 2009M04L11ai04056
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1600.00

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 1359 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mrs. Barbara H. Wilson

Mailing Address 2540 Green Street

City State Zip Code
San Francisco CA 94123-4629

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai04057

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Barbara H. Wilson

Mailing Address 2540 Green Street

City State Zip Code
San Francisco CA 94123-4629

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 7000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai04058

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)
Mr. John H. Wilson

Mailing Address 5801 Sun Lakes Blvd.
Apartment 119

City State Zip Code
Banning CA 92220-6507

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 16 / 2009

Transaction ID: 2009M04L11ai04059

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

3700.00

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 1360 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. John H. Wilson

Mailing Address 5801 Sun Lakes Blvd.
Apartment 119

City Banning State CA Zip Code 92220-6507

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 2009M04L11ai04060

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Rosalie Wilson

Mailing Address 158B Wilson Lane

City Mulberry State TN Zip Code 37359

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai04061

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Rosalie Wilson

Mailing Address 158B Wilson Lane

City Mulberry State TN Zip Code 37359

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai04062

Amount of Each Receipt this Period
150.00

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 1361 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ms. Sarah B. Wilson

Mailing Address 715 Renaissance Drive
Apartment 205

City State Zip Code
Williamsville NY 14221-8034

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	9

Transaction ID: 2009M04L11ai04063

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Douglas L Windover

Mailing Address 1 Sage Estate

City State Zip Code
Albany NY 12204-2238

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	0	9

Transaction ID: 2009M04L11ai04064

Amount of Each Receipt this Period
350.00

C.

Full Name (Last, First, Middle Initial)
Mr. Robert C. Wing

Mailing Address 6990 Gleneagle Drive

City State Zip Code
Hialeah FL 33014-6508

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	6		2	0	0	9

Transaction ID: 2009M04L11ai04065

Amount of Each Receipt this Period
375.00

SUBTOTAL of Receipts This Page (optional) ▶

975.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1362 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. Barry Wingard

Mailing Address 3603 Golfview Drive

City State Zip Code
Mechanicsburg PA 17050-2242

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
MM / DD / YYYY
03 / 03 / 2009

Transaction ID: 2009M04L11ai04066

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
Ralph & Cheryl Winkler

Mailing Address 5355 Boomer Road

City State Zip Code
Cincinnati OH 45247-7926

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 05 / 2009

Transaction ID: 2009M04L11ai04067

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Donald Winn

Mailing Address P.O. Box 1584

City State Zip Code
Rancho Santa Fe CA 92067-1584

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai04068

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1363 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Donald Winn		Date of Receipt
	Mailing Address P.O. Box 1584		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Rancho Santa Fe	CA	92067-1584
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: 2009M04L11ai04069
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 400.00	

B.	Full Name (Last, First, Middle Initial) Mr. & Mrs. Donald Winn		Date of Receipt
	Mailing Address P.O. Box 1584		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Rancho Santa Fe	CA	92067-1584
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: 2009M04L11ai04070
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 400.00	

C.	Full Name (Last, First, Middle Initial) Mr. R. M. Winn, Jr.		Date of Receipt
	Mailing Address 196 Roquemore Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Clemmons	NC	27012-8537
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: 2009M04L11ai04071
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 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: (check only one)	PAGE 1364 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Pete Winstead

Mailing Address 79 Pascal Lane

City Austin State TX Zip Code 78746-2552

FEC ID number of contributing federal political committee. **C**

Name of Employer Winstead Sechrest & Minick P.C. Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 11 / 2009

Transaction ID: 2009M04L11ai04072

Amount of Each Receipt this Period 500.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Clifford & Joan Winters, Jr.

Mailing Address 3006 Mc Neil Apartment 415

City Wichita Falls State TX Zip Code 76309-1201

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai04073

Amount of Each Receipt this Period 100.00

C.

Full Name (Last, First, Middle Initial)
Dr. Gay Winters

Mailing Address 7930 Oakbrook Drive

City Baton Rouge State LA Zip Code 70810-1808

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 09 / 2009

Transaction ID: 2009M04L11ai04074

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **850.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1365 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Beth Wintersteen		Date of Receipt
	Mailing Address 27 Myrtle Avenue		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Mill Valley	CA	94941
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Requested		Occupation Requested	Transaction ID: 2009M04L11ai04075
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="1000.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="1000.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. James Wintersteen		Date of Receipt
	Mailing Address 27 Myrtle Avenue		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Mill Valley	CA	94941-1023
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai04076
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="1000.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="1000.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Lawrence A. Wise		Date of Receipt
	Mailing Address 21070 Canyon Oak Way		<input type="text" value="03"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Cupertino	CA	95014-6570
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer K.L.A.-Tencor Corporation		Occupation Engineer	Transaction ID: 2009M04L11ai04077
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="250.00"/>	
		Amount of Each Receipt this Period	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2250.00"/>
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 1366 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Noel W. Witcher

Mailing Address 1912 Speith Rd

City State Zip Code
Henryville IN 47126-8595

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai04078

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
Mr. Ralph Witham

Mailing Address 166 Avenida Majorca
Unit Q.

City State Zip Code
Laguna Woods CA 92637-4122

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 24 / 2009

Transaction ID: 2009M04L11ai04079

Amount of Each Receipt this Period

220.00

C.

Full Name (Last, First, Middle Initial)
Mr. Ralph Witt

Mailing Address 267 Mill Street

City State Zip Code
Wedowee AL 36278-5117

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai04080

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)

545.00

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 1367 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Jon G Wittrock

Mailing Address 710 S 14th St

City State Zip Code
Sheboygan WI 53081-4333

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 275.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 17 / 2009

Transaction ID: 2009M04L11ai04081

Amount of Each Receipt this Period

275.00

B.

Full Name (Last, First, Middle Initial)

Mr. Roman Wolchuk

Mailing Address 921 Bergen Avenue Suite 637

City State Zip Code
Jersey City NJ 07306-4203

FEC ID number of contributing federal political committee. **C**

Name of Employer Roman Wolchuk Consulting Occupation Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 375.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai04082

Amount of Each Receipt this Period

375.00

C.

Full Name (Last, First, Middle Initial)

Mrs. Myrna A. Wolf

Mailing Address 33631 County Road L.

City State Zip Code
Mukwonago WI 53149-8900

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 265.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: 2009M04L11ai04083

Amount of Each Receipt this Period

100.00

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 1368 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Myrna A. Wolf

Mailing Address 33631 County Road L.

City State Zip Code
Mukwonago WI 53149-8900

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt 03 / 31 / 2009

Transaction ID: 2009M04L11ai04084

Amount of Each Receipt this Period 65.00

B. Full Name (Last, First, Middle Initial)
Ms. Jody Wolfe

Mailing Address 5255 North Kendall Drive

City State Zip Code
Miami FL 33156-2123

FEC ID number of contributing federal political committee. **C**

Name of Employer Law Enforcement Occupation Ret.

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 27 / 2009

Transaction ID: 2009M04L11ai04085

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
Mr. Robert Kenneth Wolfe

Mailing Address 8627 Augusta Lane

City State Zip Code
Holland OH 43528-9244

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 03 / 2009

Transaction ID: 2009M04L11ai04086

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 1315.00

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 1369 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Robert W. Wolfe		Date of Receipt	
	Mailing Address 3909 Blackburn Lane Apartment 43		M M / D D / Y Y Y Y Y 03 / 25 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai04087
	Burtonsville	MD	20866-1238	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		170.00	
Name of Employer Us Govt Civilian		Occupation Chief Of Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00		

B.	Full Name (Last, First, Middle Initial) Ms. Holly A. Wolfert		Date of Receipt	
	Mailing Address 1491 Jacksons Ridge Road		M M / D D / Y Y Y Y Y 03 / 19 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai04088
	Greensboro	GA	30642-5279	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1000.00	
Name of Employer N/A		Occupation Housewife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

C.	Full Name (Last, First, Middle Initial) Mrs. Hannelore Wolff		Date of Receipt	
	Mailing Address 730 28th Avenue		M M / D D / Y Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai04089
	San Mateo	CA	94403-2608	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		55.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 215.00		

SUBTOTAL of Receipts This Page (optional)	▶	1225.00
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 1370 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Glen Womack

Mailing Address P.O. Box 653

City State Zip Code
Harrisonburg LA 71340-0653

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 10 / 2009

Transaction ID: 2009M04L11ai04090

Amount of Each Receipt this Period
270.00

B. Full Name (Last, First, Middle Initial)
Ms. Betty Wong

Mailing Address 849 Featherwood Drive

City State Zip Code
Diamond Bar CA 91765-4514

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2009

Transaction ID: 2009M04L11ai04091

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Ms. Betty J. Wood

Mailing Address 20 County Road 322

City State Zip Code
Corinth MS 38834-9047

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 09 / 2009

Transaction ID: 2009M04L11ai04092

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **470.00**

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 1371 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Betty J. Wood

Mailing Address 20 County Road 322

City State Zip Code
Corinth MS 38834-9047

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 2009M04L11ai04093

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ms. Catherine D. Wood

Mailing Address 104 Olmstead Hill Road

City State Zip Code
Wilton CT 06897-1730

FEC ID number of contributing federal political committee. **C**

Name of Employer Alliance Capital Management Occupation Portfolio Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai04094

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Dexter Wood

Mailing Address 1670 Beulah Road

City State Zip Code
Vienna VA 22182-1990

FEC ID number of contributing federal political committee. **C**

Name of Employer Host Marriott Corp Occupation Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai04095

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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 1372 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. James R. Wood		Date of Receipt
	Mailing Address 209 Heritage Pointe		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Williamsburg	VA	23188-8006
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Retired		Occupation Retired	Transaction ID: 2009M04L11ai04096
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="50.00"/>

B.	Full Name (Last, First, Middle Initial) Mr. Jeffrey R. Wood		Date of Receipt
	Mailing Address 5729 Shady River		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Houston	TX	77057-1308
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai04097
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>

C.	Full Name (Last, First, Middle Initial) Ms. Jacqueline Wood- Morgan		Date of Receipt
	Mailing Address 137 Spring Valley Rd		<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Nashville	TN	37214-2833
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self-Employed		Occupation Self-Employed	Transaction ID: 2009M04L11ai04098
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1300.00"/>
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 1373 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Ronald G. Woodall

Mailing Address 5230 Braesvalley Drive

City State Zip Code
Houston TX 77096-2545

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 4 / 2 0 0 9

Transaction ID: 2009M04L11ai04099

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Kenneth B. Woodrow

Mailing Address 270 Bushaway Road

City State Zip Code
Wayzata MN 55391-1907

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 0 5 / 2 0 0 9

Transaction ID: 2009M04L11ai04100

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Woodrow Woods

Mailing Address 3640 Fiscal Ct Ste D.

City State Zip Code
West Palm Beach FL 33404-1781

FEC ID number of contributing federal political committee. **C**

Name of Employer Marine Exhaust Systems Occupation C.O.B.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 3 1 / 2 0 0 9

Transaction ID: 2009M04L11ai04101

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **2350.00**

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 1374 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Mr. Woodson Woods

Mailing Address P.O. Box 7049

City State Zip Code
Kamuela HI 96743-7049

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2009

Transaction ID: 2009M04L11ai04102

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)

Charles & Mitsuyo Woodward

Mailing Address 13724 Paradise Villas Grove

City State Zip Code
Colorado Springs CO 80921-3295

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 10 / 2009

Transaction ID: 2009M04L11ai04103

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)

Mr. & Mrs. Timothy D. Word

Mailing Address 401 Torcido Drive

City State Zip Code
San Antonio TX 78209-5647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dean Word Company Self Employed

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai04104

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

1550.00

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 1375 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Timothy D. Word

Mailing Address 401 Torcido Drive

City State Zip Code
San Antonio TX 78209-5647

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Dean Word Company Self Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2009

Transaction ID: 2009M04L11ai04105

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
Mr. Donald B. Worden

Mailing Address 612 W. Sunset Drive

City State Zip Code
Burbank WA 99323-9686

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai04106

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
Mr. Benjamin C. Wouters

Mailing Address 316 High Pointe Ridge

City State Zip Code
Prattville AL 36066-3662

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 06 / 2009

Transaction ID: 2009M04L11ai04107

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)

1600.00

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 1376 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Carl B. Wright

Mailing Address 5026 Kames Square

City State Zip Code
Louisville KY 40241-5207

FEC ID number of contributing federal political committee. **C**

Name of Employer Humana, Inc. Occupation Actuary

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 11 / 2009

Transaction ID: 2009M04L11ai04108

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. & Mrs. Donald & Gayle Wright

Mailing Address P.O. Box 12169

City State Zip Code
Jackson WY 83002-2169

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L11ai04109

Amount of Each Receipt this Period
110.00

C.

Full Name (Last, First, Middle Initial)
Mr. James C. Wright

Mailing Address 7177 Gaston Avenue #2102

City State Zip Code
Dallas TX 75214-6127

FEC ID number of contributing federal political committee. **C**

Name of Employer K.B.R. Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 05 / 2009

Transaction ID: 2009M04L11ai04110

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

860.00

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 1377 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. James H. Wright

Mailing Address 1628 Hidden Creek Lane

City State Zip Code
Belvidere IL 61008-7910

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 02 / 2009

Transaction ID: 2009M04L11ai04111

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. Lawrence T. Wright

Mailing Address P. O. Box 1258

City State Zip Code
Great Falls VA 22066-8258

FEC ID number of contributing federal political committee. **C**

Name of Employer Booz Allen & Hamilton Occupation Senior Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: 2009M04L11ai04112

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Michael Wright

Mailing Address 7156 Stanhope Lane

City State Zip Code
Riverside CA 92506-6164

FEC ID number of contributing federal political committee. **C**

Name of Employer Riverside Community College Occupation Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 26 / 2009

Transaction ID: 2009M04L11ai04113

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► 850.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1378 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Richard Wright

Mailing Address P.O. Box 512

City State Zip Code
Barberton OH 44203-0512

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: 2009M04L11ai04114
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Ronald Wright

Mailing Address 3913 Dove Creek Lane

City State Zip Code
Plano TX 75093-7542

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: 2009M04L11ai04115
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
Ms Shirley Wright

Mailing Address 408 Brookwood Lane

City State Zip Code
White Oak TX 75693-2510

FEC ID number of contributing federal political committee. **C**

Name of Employer Trendsetter Construction, Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: 2009M04L11ai04116
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 950.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1379 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Thomas W. Wright

Mailing Address 7805 E. Hawthorne Street

City State Zip Code
Tucson AZ 85710-1602

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 2 / 2 0 0 9

Transaction ID: 2009M04L11ai04117

Amount of Each Receipt this Period
110.00

B.

Full Name (Last, First, Middle Initial)
Mr. Thomas W. Wright

Mailing Address 7805 E. Hawthorne Street

City State Zip Code
Tucson AZ 85710-1602

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 9 / 2 0 0 9

Transaction ID: 2009M04L11ai04118

Amount of Each Receipt this Period
110.00

C.

Full Name (Last, First, Middle Initial)
Mr. Thomas W. Wright

Mailing Address 7805 E. Hawthorne Street

City State Zip Code
Tucson AZ 85710-1602

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 9

Transaction ID: 2009M04L11ai04119

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)

320.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1380 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mrs. Victoria Wright	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 24894 Castleton Drive	Transaction ID: 2009M04L11ai04120
	City State Zip Code Chantilly VA 20152-4388	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Homemaker Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. Warren & Lori Wubker	Date of Receipt MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 6625 Crenshaw Drive	Transaction ID: 2009M04L11ai04121
	City State Zip Code Orlando FL 32835-5749	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Requested Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Mr. Clifford L. Wurster	Date of Receipt MM / DD / YYYY 03 / 24 / 2009
	Mailing Address 198 Honors Lane	Transaction ID: 2009M04L11ai04122
	City State Zip Code State College PA 16803-1838	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
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 1381 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Dr. & Mrs. William E. Wyatt, Sr.

Mailing Address P.O. Box 100

City State Zip Code
Grapevine TX 76099-0100

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 4 / 2 0 0 9

Transaction ID: 2009M04L11ai04123

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Peter B. Wyckoff

Mailing Address 1183 County Road 2023

City State Zip Code
Glen Rose TX 76043-5985

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 6 / 2 0 0 9

Transaction ID: 2009M04L11ai04124

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mrs. Elizabeth Wyckoff

Mailing Address P.O. Box 658

City State Zip Code
Old Lyme CT 06371-0658

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 1 8 / 2 0 0 9

Transaction ID: 2009M04L11ai04125

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1382 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Ranald Wyder		Date of Receipt	
	Mailing Address P.O. Box 13056		M M / D D / Y Y Y Y Y 03 / 24 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai04126
	Oakland	CA	94661-0056	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) Mr. C. Peter Wyllie		Date of Receipt	
	Mailing Address 1320 Honeysuckle Drive		M M / D D / Y Y Y Y Y 03 / 02 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai04127
	Watkinsville	GA	30677-6609	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		500.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Mr. Rob Wynaalda		Date of Receipt	
	Mailing Address 420 9 Mile Rd NE		M M / D D / Y Y Y Y Y 03 / 31 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai04128
	Comstock Park	MI	49321-9683	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1875.00	
Name of Employer Requested		Occupation Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1875.00		

SUBTOTAL of Receipts This Page (optional)	▶	2675.00
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 1383 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Truman E. Yancey

Mailing Address 1923 E. Joyce Blvd.
#230

City Fayetteville State AR Zip Code 72703-5171

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2009

Transaction ID: 2009M04L11ai04129

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mr. William Yarwood

Mailing Address 2651 E. Quite Circle
Apartment C5

City Wasilla State AK Zip Code 99654-7395

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 12 / 2009

Transaction ID: 2009M04L11ai04130

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Mr. William Yarwood

Mailing Address 2651 E. Quite Circle
Apartment C5

City Wasilla State AK Zip Code 99654-7395

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2009

Transaction ID: 2009M04L11ai04131

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► 295.00

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 1384 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. William Yarwood

Mailing Address 2651 E. Quite Circle
Apartment C5

City Wasilla State AK Zip Code 99654-7395

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai04132

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert Yates

Mailing Address 128 Via Havre

City Newport Beach State CA Zip Code 92663-4905

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: 2009M04L11ai04133

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
Mr. Tom Yates

Mailing Address 9316 Terrace View Court

City Jerome State MI Zip Code 49249-9783

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai04134

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ▶ **470.00**

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 1385 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. William F. Yeoman		Date of Receipt																					
	Mailing Address 3030 Country Club Blvd.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		1	8		2	0	0	9														
	City State Zip Code Sugar Land TX 77478-3630		Transaction ID: 2009M04L11ai04135																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: University Of Houston Occupation: Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		100.00																						

B.	Full Name (Last, First, Middle Initial) Mr. William F. Yeoman		Date of Receipt																					
	Mailing Address 3030 Country Club Blvd.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		2	3		2	0	0	9														
	City State Zip Code Sugar Land TX 77478-3630		Transaction ID: 2009M04L11ai04136																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: University Of Houston Occupation: Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		50.00																						

C.	Full Name (Last, First, Middle Initial) Mr. Mark Yingling		Date of Receipt																					
	Mailing Address 833 Aspen Peak Loop Unit 1323		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		0	6		2	0	0	9														
	City State Zip Code Henderson NV 89011-4984		Transaction ID: 2009M04L11ai04137																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period																						
Name of Employer: Ernst & Young, Llp Occupation: Auditor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		75.00																						

SUBTOTAL of Receipts This Page (optional)	▶	225.00
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 1386 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Douglas W. York		Date of Receipt
	Mailing Address 3441 E. Harbour Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 10 / 2009
	City	State	Zip Code
	Phoenix	AZ	85034-7229
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai04138
Name of Employer Self-Employed		Occupation Self-Employed	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00

B.	Full Name (Last, First, Middle Initial) Mr. Greg York		Date of Receipt
	Mailing Address 6105 Homestead Blvd.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 26 / 2009
	City	State	Zip Code
	Midland	TX	79707-5058
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai04139
Name of Employer Conocophillips		Occupation Drilling Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

C.	Full Name (Last, First, Middle Initial) Ms. Katherine Youell		Date of Receipt
	Mailing Address 3910 Baldwin Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 09 / 2009
	City	State	Zip Code
	Chester	VA	23831-4703
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ai04140
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 75.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 775.00
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 1387 / 1945
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Dr. Julian R. Youmans

Mailing Address 44124 Greenview Drive

City State Zip Code
El Macero CA 95618-1077

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2009

Transaction ID: 2009M04L11ai04141

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mrs. Cheryl Young

Mailing Address 512 East June Street

City State Zip Code
Alpine TX 79830-4223

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai04142

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Cheryl Young

Mailing Address 512 East June Street

City State Zip Code
Alpine TX 79830-4223

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai04143

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional) ▶ **635.00**

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 1388 / 1945
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. George Young	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 235 Walker Street Apartment 252	Transaction ID: 2009M04L11ai04144
	City Lenox State MA Zip Code 01240-2749	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 600.00	

B.	Full Name (Last, First, Middle Initial) Mr. John Young	Date of Receipt MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 3966 Lakeside Drive	Transaction ID: 2009M04L11ai04145
	City Odessa State TX Zip Code 79762-7202	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ref-Chem Llc Occupation Project Superintendent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Karen Young	Date of Receipt MM / DD / YYYY 03 / 27 / 2009
	Mailing Address 4300 N Ohio	Transaction ID: 2009M04L11ai04146
	City Salina State KS Zip Code 67401	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Town and Country Animal Hospit Occupation Veterinarian Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	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 1389 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Ruth Young
Mailing Address 290 Paul Copas Road
City Winchester State OH Zip Code 45697-9441
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 321.00
Date of Receipt 03 / 17 / 2009
Transaction ID: 2009M04L11ai04147
Amount of Each Receipt this Period 101.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas Duane Young
Mailing Address 4600 N. Sunset Hills Lane
City Tucson State AZ Zip Code 85745-9436
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Self-Employed
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 03 / 16 / 2009
Transaction ID: 2009M04L11ai04148
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Mr. William F. Young
Mailing Address 833 Kalli Creek Lane
City Saint Augustine State FL Zip Code 32080-5816
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 03 / 09 / 2009
Transaction ID: 2009M04L11ai04149
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 701.00
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 1390 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. William F. Young

Mailing Address 833 Kalli Creek Lane

City State Zip Code
Saint Augustine FL 32080-5816

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2009

Transaction ID: 2009M04L11ai04150

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Wasil R. Yurchak

Mailing Address 2711 Bridle Path Pl.

City State Zip Code
Bethlehem PA 18017-3803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
U.B.S. Financial Services, Inc. Investment Executive

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai04151

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Christopher P. Zachary

Mailing Address 1915 N. Damen Avenue
Unit F.

City State Zip Code
Chicago IL 60647-6562

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
O.S.I. Pharmaceutical Director/Bio Tech Company

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 2009M04L11ai04152

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: (check only one)	PAGE 1391 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Joan Zachropoulos	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address 17 Rolling Ridge Road	Transaction ID: 2009M04L11ai04153
	City State Zip Code New City NY 10956-6931	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) Mr. Kenneth Zadwick	Date of Receipt MM / DD / YYYY 03 / 18 / 2009
	Mailing Address 328 Seawind Dr.	Transaction ID: 2009M04L11ai04154
	City State Zip Code Vallejo CA 94590-8137	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) Mr. Claude C. Zaiontz	Date of Receipt MM / DD / YYYY 03 / 19 / 2009
	Mailing Address 231 Palo Grande Drive	Transaction ID: 2009M04L11ai04155
	City State Zip Code San Antonio TX 78232-3029	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
Name of Employer The Zee Company, Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

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 1392 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Joseph J. Zaladonis

Mailing Address 1610 Knollwood Road

City State Zip Code
Bethlehem PA 18015-5531

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **03 / 04 / 2009**

Transaction ID: 2009M04L11ai04156

Amount of Each Receipt this Period **105.00**

B. Full Name (Last, First, Middle Initial)
Mr. Johnny Zamrzla

Mailing Address 2229 E. Avenue Q.

City State Zip Code
Palmdale CA 93550-4140

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Western Pacific Roofing Corporation Roofing & Sheet Metal Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 11 / 2009**

Transaction ID: 2009M04L11ai04157

Amount of Each Receipt this Period **250.00**

C. Full Name (Last, First, Middle Initial)
Ms. Elizabeth Zanardi

Mailing Address 679 N. Santa Cruz Avenue

City State Zip Code
Los Gatos CA 95030-4324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **03 / 05 / 2009**

Transaction ID: 2009M04L11ai04158

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional) ► **605.00**

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 1393 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
S. Zanello

Mailing Address 2050 Forest View Avenue

City Hillsborough State CA Zip Code 94010-6119

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Gcc Enterprises, Inc. Occupation Lawyer, Mother

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 335.00

Date of Receipt MM / DD / YYYY 03 / 24 / 2009

Transaction ID: 2009M04L11ai04159

Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Mr. Martin P. Zanotti

Mailing Address 12223 Cypresswood Drive

City Houston State TX Zip Code 77070-2733

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt MM / DD / YYYY 03 / 02 / 2009

Transaction ID: 2009M04L11ai04160

Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Maria Zarranz

Mailing Address 3610 S.W. 88Th Place

City Miami State FL Zip Code 33165-4374

FEC ID number of contributing federal political committee. **C**

Name of Employer Turning Point C.M.H.C. Occupation Mental Health Counselor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 690.00

Date of Receipt MM / DD / YYYY 03 / 03 / 2009

Transaction ID: 2009M04L11ai04161

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 225.00

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 1394 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Marie D. Zartman

Mailing Address 713 Quaint Acres Drive

City State Zip Code
Silver Spring MD 20904-2725

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
John Hopkins University Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2009

Transaction ID: 2009M04L11ai04162

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Larry D. Zeidler

Mailing Address P.O. Box 429

City State Zip Code
Clayton CA 94517-0429

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self-Employed Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2009

Transaction ID: 2009M04L11ai04163

Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial)
Mr. Fred Zelaya

Mailing Address 407 E. 12Th St. Apt. 1FnE

City State Zip Code
New York NY 10009-1343

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Consultant To Caterpillar, Inc Banker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai04164

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **425.00**

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 1395 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Edward R. Ziegler

Mailing Address 2015 Claremont Ln.

City State Zip Code
Houston TX 77019-5803

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 09 / 2009

Transaction ID: 2009M04L11ai04165

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Mr. Edward R. Ziegler

Mailing Address 2015 Claremont Ln.

City State Zip Code
Houston TX 77019-5803

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2009

Transaction ID: 2009M04L11ai04166

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Sumner & Marie Ziegler

Mailing Address 22 Beidler Drive

City State Zip Code
Washington Crossin PA 18977-1349

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai04167

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 550.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 1396 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mr. Michael Zigich	Date of Receipt MM / DD / YYYY 03 / 19 / 2009
	Mailing Address 1 Inverness Park Circle	Transaction ID: 2009M04L11ai04168
	City State Zip Code Houston TX 77055-4700	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Requested	Occupation Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Mr. William Zimmerman	Date of Receipt MM / DD / YYYY 03 / 20 / 2009
	Mailing Address 11837 S.E. Madison Street	Transaction ID: 2009M04L11ai04169
	City State Zip Code Portland OR 97216-3947	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Mr. Robert B. Zinser	Date of Receipt MM / DD / YYYY 03 / 13 / 2009
	Mailing Address 3158 Orleans E.	Transaction ID: 2009M04L11ai04170
	City State Zip Code San Diego CA 92110-5946	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1397 / 1945

(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Mr. Stephen E. Zirkle

Mailing Address 5102 Stonebridge Drive

City State Zip Code
Muncie IN 47304-8918

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai04171

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
Mrs. Veronica Zitella

Mailing Address 3731 RFD Albert Lane

City State Zip Code
Long Grove IL 60047

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Homemaker Homemaker

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 3 / 2 0 0 9

Transaction ID: 2009M04L11ai04172

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)
Dr. Eli Ziv

Mailing Address 4739 Ronmar Place

City State Zip Code
Woodland Hills CA 91364-3427

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Center Orthopaedic Physician

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: 2009M04L11ai04173

Amount of Each Receipt this Period

110.00

SUBTOTAL of Receipts This Page (optional)

735.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1398 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Mary L. Zollner

Mailing Address 1711 N.W. 107Th Terrace

City State Zip Code
Plantation FL 33322-6424

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: 2009M04L11ai04174

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Demitri Zouras

Mailing Address 6611 Brentwood Drive

City State Zip Code
Huntington Beach CA 92648-6655

FEC ID number of contributing federal political committee. **C**

Name of Employer Orange County Sanitation District Occupation Electrician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 2009M04L11ai04175

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Dr. George Zumbro

Mailing Address 444 Northridge Circle

City State Zip Code
Evans GA 30809-4542

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation Self-Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
MM / DD / YYYY
03 / 27 / 2009

Transaction ID: 2009M04L11ai04176

Amount of Each Receipt this Period
220.00

SUBTOTAL of Receipts This Page (optional) ▶ **420.00**

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 1399 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Ms. Mary Ann Zuniga		Date of Receipt	
	Mailing Address 487 S. Bowie		M M / D D / Y Y Y Y 03 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai04177
	San Benito	TX	78586-3711	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		150.00	
Name of Employer Self-Employed		Occupation Self-Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) Mrs. Annabelle F. Zylstra		Date of Receipt	
	Mailing Address 5303 154Th Avenue S.E.		M M / D D / Y Y Y Y 03 / 25 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ai04178
	Bellevue	WA	98006-5151	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00		

C.	Full Name (Last, First, Middle Initial) MR RALPH H LANE		Date of Receipt	
	Mailing Address 6427 CHARLES STREET		M M / D D / Y Y Y Y 03 / 31 / 2009	
	City	State	Zip Code	Transaction ID: 2009M04L11ACH00001
	RACINE	WI	53402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		-300.00	
Name of Employer SELF-EMPLOYED		Occupation LAWYER		ACH RETURN CONTRIBUTION - 02/09/2009
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 0.00		

SUBTOTAL of Receipts This Page (optional)	-50.00
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 1400 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR RALPH H LANE

Mailing Address 6427 CHARLES STREET

City RACINE State WI Zip Code 53402

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ACH00002
 Amount of Each Receipt this Period: -300.00
 ACH RETURN CONTRIBUTION - 01/09/2009

B. Full Name (Last, First, Middle Initial)
CHARLES WEEKS

Mailing Address 6018 CANNON HILL ROAD

City FORT WASHINGTON State PA Zip Code 19034

FEC ID number of contributing federal political committee. **C**

Name of Employer ASHFORD CAPITAL MANAGEMENT Occupation INVESTMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ACH00003
 Amount of Each Receipt this Period: -200.00
 ACH RETURN CONTRIBUTION - 02/06/2009

C. Full Name (Last, First, Middle Initial)
CHARLES WEEKS

Mailing Address 6018 CANNON HILL ROAD

City FORT WASHINGTON State PA Zip Code 19034

FEC ID number of contributing federal political committee. **C**

Name of Employer ASHFORD CAPITAL MANAGEMENT Occupation INVESTMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: 2009M04L11ACH00004
 Amount of Each Receipt this Period: -200.00
 ACH RETURN CONTRIBUTION - 02/06/2009

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 1401 / 1945
<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR & MRS CARL R PETERSON		Date of Receipt
	Mailing Address 3104 164TH AVENUE SE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2009
	City HARWOOD	State ND	Zip Code 58072
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ACH00005
	Name of Employer PETERSON FARMS SEED		Occupation MANAGEMENT
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text"/> -400.00 ACH RETURN CONTRIBUTION - 01/13/2009	
Aggregate Year-to-Date ▼		<input type="text"/> 0.00	

B.	Full Name (Last, First, Middle Initial) MRS JAMIE ZISSIS		Date of Receipt
	Mailing Address 674 ALPINE VIEW DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2009
	City INCLINE VILLAGE	State NV	Zip Code 89451
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ACH00006
	Name of Employer INFORMATION REQUESTED 02/24/2009		Occupation INFORMATION REQUESTED 02/24/2009
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text"/> -5000.00 ACH RETURN CONTRIBUTION - 02/24/2009	
Aggregate Year-to-Date ▼		<input type="text"/> 0.00	

C.	Full Name (Last, First, Middle Initial) MR WILLIAM H BREGENZER		Date of Receipt
	Mailing Address 24 BAYBERRY DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 31 / 2009
	City CLIFTON PARK	State NY	Zip Code 12065
	FEC ID number of contributing federal political committee. C		Transaction ID: 2009M04L11ACH00007
	Name of Employer RETIRED		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text"/> -100.00 ACH RETURN CONTRIBUTION - 12/05/2009	
Aggregate Year-to-Date ▼		<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> -5500.00
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 1402 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR MIKHAIL GORETOY	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1414 REQUA ROAD	Transaction ID: 2009M04L11ACH00008
	City State Zip Code CHERRYVILLE NC 28021	Amount of Each Receipt this Period -50.00
	FEC ID number of contributing federal political committee. C	ACH RETURN CONTRIBUTION - 5/09/2008
	Name of Employer Occupation FLEETNET AMERICA COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

B.	Full Name (Last, First, Middle Initial) MR MIKHAIL GORETOY	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1414 REQUA ROAD	Transaction ID: 2009M04L11ACH00009
	City State Zip Code CHERRYVILLE NC 28021	Amount of Each Receipt this Period -50.00
	FEC ID number of contributing federal political committee. C	ACH RETURN CONTRIBUTION - 06/06/2008
	Name of Employer Occupation FLEETNET AMERICA COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

C.	Full Name (Last, First, Middle Initial) MR MIKHAIL GORETOY	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1414 REQUA ROAD	Transaction ID: 2009M04L11ACH00010
	City State Zip Code CHERRYVILLE NC 28021	Amount of Each Receipt this Period -50.00
	FEC ID number of contributing federal political committee. C	ACH RETURN CONTRIBUTION - 07/11/2008
	Name of Employer Occupation FLEETNET AMERICA COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

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: (check only one)	PAGE 1403 / 1945
	<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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR MIKHAIL GORETOY	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1414 REQUA ROAD	Transaction ID: 2009M04L11ACH00011
	City State Zip Code CHERRYVILLE NC 28021	Amount of Each Receipt this Period -300.00
	FEC ID number of contributing federal political committee. C	ACH RETURN CONTRIBUTION - 07/25/2008
Name of Employer FLEETNET AMERICA	Occupation COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

B.	Full Name (Last, First, Middle Initial) MR MIKHAIL GORETOY	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1414 REQUA ROAD	Transaction ID: 2009M04L11ACH00012
	City State Zip Code CHERRYVILLE NC 28021	Amount of Each Receipt this Period -50.00
	FEC ID number of contributing federal political committee. C	ACH RETURN CONTRIBUTION - 08/08/2008
Name of Employer FLEETNET AMERICA	Occupation COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

C.	Full Name (Last, First, Middle Initial) MR MIKHAIL GORETOY	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1414 REQUA ROAD	Transaction ID: 2009M04L11ACH00013
	City State Zip Code CHERRYVILLE NC 28021	Amount of Each Receipt this Period -50.00
	FEC ID number of contributing federal political committee. C	ACH RETURN CONTRIBUTION - 09/12/2008
Name of Employer FLEETNET AMERICA	Occupation COORDINATOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

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 1404 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MR MIKHAIL GORETOY

Mailing Address 1414 REQUA ROAD

City State Zip Code
CHERRYVILLE NC 28021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLEETNET AMERICA COORDINATOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ACH00014

Amount of Each Receipt this Period
-50.00

ACH RETURN CONTRIBUTION - 10/09/2008

B. Full Name (Last, First, Middle Initial)
MR MIKHAIL GORETOY

Mailing Address 1414 REQUA ROAD

City State Zip Code
CHERRYVILLE NC 28021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLEETNET AMERICA COORDINATOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ACH00015

Amount of Each Receipt this Period
-50.00

ACH RETURN CONTRIBUTION - 11/10/2008

C. Full Name (Last, First, Middle Initial)
MR MIKHAIL GORETOY

Mailing Address 1414 REQUA ROAD

City State Zip Code
CHERRYVILLE NC 28021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FLEETNET AMERICA COORDINATOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ACH00016

Amount of Each Receipt this Period
-50.00

ACH RETURN CONTRIBUTION - 12/05/2008

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 1405 / 1945
(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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MICHAEL DUNKLE

Mailing Address 1733 GOODMAN AVE

City State Zip Code
REDONDO BEACH CA 90278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MARKETING AND SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ACH00017

Amount of Each Receipt this Period
-100.00

ACH RETURN CONTRIBUTION - 12/05/2008

B.

Full Name (Last, First, Middle Initial)
MICHAEL DUNKLE

Mailing Address 1733 GOODMAN AVE

City State Zip Code
REDONDO BEACH CA 90278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED MARKETING AND SALES

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ACH00018

Amount of Each Receipt this Period
-100.00

ACH RETURN CONTRIBUTION - 11/03/2008

C.

Full Name (Last, First, Middle Initial)
MR BOB HARRIS

Mailing Address 224 WHISPERING WOODS CT

City State Zip Code
LITTLE SILVER NJ 07739

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 150.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 2009M04L11ACH00019

Amount of Each Receipt this Period
-100.00

ACH RETURN CONTRIBUTION - 12/05/2008

SUBTOTAL of Receipts This Page (optional)	-300.00
TOTAL This Period (last page this line number only)	1594728.27

**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 1406 / 1945
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) Aflac Inc. PAC	Date of Receipt MM / DD / YYYY 03 / 19 / 2009
	Mailing Address 1932 Wynnton Road A Multi Candidate Committee	Transaction ID: 2009M04L11CPC00001
	City Columbus State GA Zip Code 31999	Amount of Each Receipt this Period 15000.00
	FEC ID number of contributing federal political committee. C C00034157	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00

B.	Full Name (Last, First, Middle Initial) American Bankers Association Bank PAC	Date of Receipt MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 1120 Connecticut Avenue N. W.	Transaction ID: 2009M04L11CPC00002
	City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 15000.00
	FEC ID number of contributing federal political committee. C C00004275	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00

C.	Full Name (Last, First, Middle Initial) American Dental PAC	Date of Receipt MM / DD / YYYY 03 / 31 / 2009
	Mailing Address 1111 14Th Street, NW 11th Floor	Transaction ID: 2009M04L11CPC00003
	City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 15000.00
	FEC ID number of contributing federal political committee. C C00000729	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00

SUBTOTAL of Receipts This Page (optional)	45000.00
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 1407 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
American Nurses Association PAC

Mailing Address 8515 Georgia Avenue
Suite 400

City State Zip Code
Silver Springs MD 20910

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	0	9

Transaction ID: 2009M04L11CPC00004
 Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Independent Insurance Agents & Brokers
Of America PAC

Mailing Address 412 First Street, SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	0	9

Transaction ID: 2009M04L11CPC00005
 Amount of Each Receipt this Period
15000.00

C. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees PAC

Mailing Address 1550 Crystal Drive
Crystal Square, Suite 300

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	9

Transaction ID: 2009M04L11CPC00006
 Amount of Each Receipt this Period
15000.00

SUBTOTAL of Receipts This Page (optional) ► **32500.00**

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 1408 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mortgage Bankers Association PAC
Mailing Address 1919 Pennsylvania Avenue N.W.
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00004812
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00
Date of Receipt 03 / 30 / 2009
Transaction ID: 2009M04L11CPC00007
Amount of Each Receipt this Period 15000.00

B. Full Name (Last, First, Middle Initial)
N.R.A.- Political Victory Fund
Mailing Address 11250 Waples Mill Road
City Fairfax State VA Zip Code 22030
FEC ID number of contributing federal political committee. **C** C00053553
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00
Date of Receipt 03 / 20 / 2009
Transaction ID: 2009M04L11CPC00008
Amount of Each Receipt this Period 15000.00

C. Full Name (Last, First, Middle Initial)
Realtors PAC
Mailing Address 430 North Michigan Avenue
City Chicago State IL Zip Code 60611
FEC ID number of contributing federal political committee. **C** C00030718
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00
Date of Receipt 03 / 18 / 2009
Transaction ID: 2009M04L11CPC00009
Amount of Each Receipt this Period 15000.00

SUBTOTAL of Receipts This Page (optional) ► 45000.00
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 1409 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Battle Born PAC

Mailing Address P.O. Box 370386

City State Zip Code
Las Vegas NV 89137

FEC ID number of contributing federal political committee. **C** C00364596

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 2009M04L11CPC00010

Amount of Each Receipt this Period

15000.00

[MEMO ITEM]

2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

B.

Full Name (Last, First, Middle Initial)
Senate Majority Fund

Mailing Address P.O. Box 32025

City State Zip Code
Phoenix AZ 85064

FEC ID number of contributing federal political committee. **C** C00368431

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 2009M04L11CPC00011

Amount of Each Receipt this Period

15000.00

[MEMO ITEM]

2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

C.

Full Name (Last, First, Middle Initial)
The Senate Victory Fund PAC

Mailing Address P.O. Box 7274

City State Zip Code
Tupelo MS 38802

FEC ID number of contributing federal political committee. **C** C00202861

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 2009M04L11CPC00012

Amount of Each Receipt this Period

15000.00

[MEMO ITEM]

2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

SUBTOTAL of Receipts This Page (optional) ▶

0.00

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 1410 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Kpac
Mailing Address P.O. Box 820365
City Dallas State TX Zip Code 75382
FEC ID number of contributing federal political committee. **C** C0036551
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00
Date of Receipt 11 / 28 / 2008
Transaction ID: 2009M04L11CPC00013
Amount of Each Receipt this Period 10000.00
[MEMO ITEM]
2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

B. Full Name (Last, First, Middle Initial)
Next Century Fund
Mailing Address 116 S. Royal St.
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00343947
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 15000.00
Date of Receipt 11 / 28 / 2008
Transaction ID: 2009M04L11CPC00014
Amount of Each Receipt this Period 15000.00
[MEMO ITEM]
2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

C. Full Name (Last, First, Middle Initial)
Hawkeye PAC
Mailing Address P.O. Box 7255
City Des Moines State IA Zip Code 50309
FEC ID number of contributing federal political committee. **C** C00379479
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 11 / 28 / 2008
Transaction ID: 2009M04L11CPC00015
Amount of Each Receipt this Period 5000.00
[MEMO ITEM]
2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

SUBTOTAL of Receipts This Page (optional) ▶ 0.00
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 1411 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Defend America PAC
Mailing Address P.O. Box 2626

City State Zip Code
Tuscaloosa AL 35403

FEC ID number of contributing federal political committee. **C** C00325993

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	8

Transaction ID: 2009M04L11CPC00016
 Amount of Each Receipt this Period
10000.00

[MEMO ITEM]
2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

B. Full Name (Last, First, Middle Initial)
American Healthcare Asscoiation PAC
Mailing Address 1201 L St., NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	8

Transaction ID: 2009M04L11CPC00017
 Amount of Each Receipt this Period
5000.00

[MEMO ITEM]
2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

C. Full Name (Last, First, Middle Initial)
Freedom Fund
Mailing Address 1155 21st Street NW Suite 300

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00390674

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	8

Transaction ID: 2009M04L11CPC00018
 Amount of Each Receipt this Period
15000.00

[MEMO ITEM]
2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

SUBTOTAL of Receipts This Page (optional) ► 0.00

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 1412 / 1945
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) The Hawkeye PAC		Date of Receipt
	Mailing Address P.O. Box 7255		<input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Des Moines	IA	50309
	FEC ID number of contributing federal political committee.		<input type="text" value="C00379479"/>
Name of Employer		Occupation	Transaction ID: 2009M04L11CPC00019 Amount of Each Receipt this Period <input type="text" value="10000.00"/>
Receipt For:		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="10000.00"/>	
<input type="checkbox"/> Other (specify) ▼			[MEMO ITEM] 2008 PAC contribution from 3/12/2009 transfer Chamblis Victory Cmte

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="122500.00"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 1413 / 1945
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
 Chambliss Victory Committee

Mailing Address P.O. Box 75103

City State Zip Code
 Washington DC 20013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 106669.11

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 12 / 2009

Transaction ID: 2009M04L12TA00001

Amount of Each Receipt this Period
 106669.11

09CT09

B.

Full Name (Last, First, Middle Initial)
 Republican Party of Arkansas

Mailing Address P.O. Box 3704

City State Zip Code
 Little Rock AR 72203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 80.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2009

Transaction ID: 2009M04L12TA00002

Amount of Each Receipt this Period
 80.00

Y09WMTEE

SUBTOTAL of Receipts This Page (optional)	▶	106749.11
TOTAL This Period (last page this line number only)	▶	106749.11

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1414 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
M. M. BOYCE, BOYCEM. M

Mailing Address 11060 WEYMOUTH CT
APT 416

City State Zip Code
WALDORF MD 20603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
636.40

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: 2009M04L1500001

Amount of Each Receipt this Period
159.10

INSURANCE PREMIUM (CIGNA 2009M04)

B. Full Name (Last, First, Middle Initial)
FEDEX EXPRESS

Mailing Address P.O. BOX 727

City State Zip Code
MEMPHIS TN 38194-2112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1954.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	7	/	2	0	0	9

Transaction ID: 2009M04L1500002

Amount of Each Receipt this Period
59.76

DELIVERY COST (2009 M02)

C. Full Name (Last, First, Middle Initial)
JULIE FLEMING

Mailing Address 6719 BOSTWICK DRIVE

City State Zip Code
SPRINGFIELD VA 22151

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: 2009M04L1500003

Amount of Each Receipt this Period
250.00

ASSET SALE

SUBTOTAL of Receipts This Page (optional) ► **468.86**

TOTAL This Period (last page this line number only) ►

A. Form/Schedule : **SA15**

Transaction ID :

Regarding 'Asset Sales' reported on Schedule A supporting Line 15 of our report, occasionally the RNC has used office equipment that we need to dispose of. This equipment may be sold in bulk to a commercial liquidation business or piece by piece to individuals. When this is done, these items are reported as 'asset sale' and the price charged is such that they in no way constitute a political contribution. The used assets liquidated by sale to individuals or business are reported as 'Asset Sale' and are priced at fair market value. These items sold by the RNC are not unique to our business, they are common items found in most business, such as computers and cell phones. As such, the market price for these items are determined by referring to internet auction sites or checking replacement values from retail sources.

A. Form/Schedule : **SA15**

Transaction ID :

With regard to the usual and normal charge for fees received from a federal candidate on Schedule A supporting Line 15, the RNC charges fair market value for services it provides. Prices are intended to recover the cost for providing the service. The services reported on this schedule for which the RNC received payment were not services of a nature which is unique to the RNC. Services of this type are common in the business community and as such, the RNC compares and sets the price charged to prices available from other commercial sources.

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1416 / 1945

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
HIRSCH FINANCIAL SERVICES, INC

Mailing Address 164 LAKEFRONT DRIVE

City State Zip Code
HUNT VALLEY MD 21030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15434.74

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L1500004

Amount of Each Receipt this Period

7442.27

COBRA REIMBURSEMENT SVS

B.

Full Name (Last, First, Middle Initial)
INTERNAL REVENUE SERVICE

Mailing Address 11601 ROOSEVELT BLVD

City State Zip Code
PHILADELPHIA PA 19154

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: 2009M04L1500005

Amount of Each Receipt this Period

595.00

TAX REFUND (2008 PRE ELECTION)

C.

Full Name (Last, First, Middle Initial)
STEPHEN M KINNEY, KINNEYSTE

Mailing Address 920 EMERALD STREET

City State Zip Code
REDONDO BEACH CA 90277

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1309.89

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: 2009M04L1500006

Amount of Each Receipt this Period

436.63

INSURANCE PREMIUM (CIGNA 2009M04)

SUBTOTAL of Receipts This Page (optional) ▶

8473.90

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 1417 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
GEORGE LYNCH, LYNCHGEOR

Mailing Address 700 PRINCESS STREET
SUITE 200

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1810.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2009

Transaction ID: 2009M04L1500007

Amount of Each Receipt this Period
1180.00

ASSET SALE

SUBTOTAL of Receipts This Page (optional)	▶	1180.00
TOTAL This Period (last page this line number only)	▶	10122.76

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 1418 / 1945
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS

Mailing Address 20002 NORTH 19TH AVENUE

City State Zip Code
PHOENIX AZ 85027

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
23.80

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 3 0 / 2 0 0 9

Transaction ID: 2009M04L1700001

Amount of Each Receipt this Period
23.80

REBATE

SUBTOTAL of Receipts This Page (optional)	▶	23.80
TOTAL This Period (last page this line number only)	▶	23.80

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1419 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
ABC BURGLAR ALARM SYSTEMS, INC

Mailing Address 1532 A & B POINTER RIDGE PLACE

City BOWIE State MD Zip Code 20716

Purpose of Disbursement
SECURITY SERVICES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00001
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
ABIS, INC

Mailing Address C/O CATHY WELLEN
10330 SOUTH DOLFIELD ROAD

City OWINGS MILL State MD Zip Code 21117

Purpose of Disbursement
POSTAGE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00002
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
ABIS, INC

Mailing Address C/O CATHY WELLEN
10330 SOUTH DOLFIELD ROAD

City OWINGS MILL State MD Zip Code 21117

Purpose of Disbursement
PRINT,MAIL PRODUCTION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00003
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

A. Form/Schedule : **SB21B**

Transaction ID :

All expenditures listed for Radio Time, Production, Video Production, Telemarketing, Ad Costs, Media Costs, Media Research, Advertising, Satellite Time, Video or Broadcast Costs, Production Costs, Advertising Costs, Video Services, Broadcast Services, Fax Broadcasting, Illustration Costs, Mailing Costs, Photography Costs, Photo Services, Photo Shoot, banner, calligraphy costs, catering costs, event cost, event supplies, graphic services, online banner, production design, projection presentation cost, promotional supplies and Media Services are RNC operating costs. None of these expenditures are Candidate specific. No media related expenditures listed on line 21 are intended for or directed by a specific candidate. They are either generic overhead costs or RNC fundraising costs.

A. Form/Schedule : **SB21B**

Transaction ID :

All expenditures listed for 'art production', 'audio costs', 'entertainment costs', 'music services', 'photography costs', 'photos' and 'reception costs' these are RNC operating costs. None of these expenditures are Candidate specific. No expenditures listed on line 21 are intended for or directed by a specific candidate. They are either generic overhead costs or RNC fundraising costs.

A. Form/Schedule : **SB21B**

Transaction ID :

Payments to another political committee disclosed on Schedule B supporting Line 21(b) are not contributions. They are payments for goods and services received at usual and normal rates. With regard to the usual and normal rates, we are assured the fee is a commercially reasonable rate because we regularly obtain similar products from a variety of sources both political and commercial.

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ADP, INC	Transaction ID: 2009M04L21A00004
	Mailing Address P O BOX 9001006	Date of Disbursement 03 / 05 / 2009
	City LOUISVILLE State KY Zip Code 40290-1006	Amount of Each Disbursement this Period 760.10
	Purpose of Disbursement PAYROLL COST Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ADP, INC	Transaction ID: 2009M04L21A00005
	Mailing Address P O BOX 9001006	Date of Disbursement 03 / 26 / 2009
	City LOUISVILLE State KY Zip Code 40290-1006	Amount of Each Disbursement this Period 1030.59
	Purpose of Disbursement PAYROLL COST Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ADP, INC	Transaction ID: 2009M04L21A00006
	Mailing Address P O BOX 9001006	Date of Disbursement 03 / 05 / 2009
	City LOUISVILLE State KY Zip Code 40290-1006	Amount of Each Disbursement this Period 2220.01
	Purpose of Disbursement PAYROLL COST Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4010.70
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ADP, INC.	Transaction ID: 2009M04L21A00007 Date of Disbursement
	Mailing Address UNEMPLOYMENT P O BOX 78415	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City PHOENIX State AZ Zip Code 85062-8415	Amount of Each Disbursement this Period
	Purpose of Disbursement UNEMPLOYMENT MGMT COST	<input type="text" value="440.13"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AMERICAN DIRECT, INC	Transaction ID: 2009M04L21A00008 Date of Disbursement
	Mailing Address 1272 CORPORATE PARK DRIVE SECOND FL	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement PRINT PRODUCTION	<input type="text" value="308.27"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AMERICAN DIRECT, INC	Transaction ID: 2009M04L21A00009 Date of Disbursement
	Mailing Address 1272 CORPORATE PARK DRIVE SECOND FL	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement PRINT PRODUCTION	<input type="text" value="308.27"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1056.67"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMERICAN DIRECT, INC	Transaction ID: 2009M04L21A00010 Date of Disbursement
	Mailing Address 1272 CORPORATE PARK DRIVE SECOND FL	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement PRINT PRODUCTION	<input type="text" value="1934.76"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AMERICAN DIRECT, INC	Transaction ID: 2009M04L21A00011 Date of Disbursement
	Mailing Address 1272 CORPORATE PARK DRIVE SECOND FL	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement PRINT PRODUCTION	<input type="text" value="1934.76"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: 2009M04L21A00012 Date of Disbursement
	Mailing Address PO BOX 1270	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City NEWARK State NJ Zip Code 07101-1270	Amount of Each Disbursement this Period
	Purpose of Disbursement AIR FARE	<input type="text" value="5.60"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3875.12"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 5620 UNIVERSITY PKWY City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00012M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 5.60 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00013 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 206.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) FRONTIER AIRLINES Mailing Address FRONTIER CENTER ONE 7001 TOWER RD City DENVER State CO Zip Code 80249 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00013M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 206.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	206.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00014 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 370.20</p>
<p>B. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 5620 UNIVERSITY PKWY</p> <p>City WINSTON SALEM State NC Zip Code 27105</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00014M Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 370.20</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00015 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 484.60</p>

SUBTOTAL of Disbursements This Page (optional) ▶

854.80

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) UNITED AIRLINES</p> <p>Mailing Address PO BOX 2013</p> <p>City CHICAGO State IL Zip Code 60673</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00015M</p> <p>Date of Disbursement MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 484.60</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00016</p> <p>Date of Disbursement MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 991.20</p>
<p>C. Full Name (Last, First, Middle Initial) FRONTIER AIRLINES</p> <p>Mailing Address FRONTIER CENTER ONE 7001 TOWER RD</p> <p>City DENVER State CO Zip Code 80249</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00016M</p> <p>Date of Disbursement MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 991.20</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

991.20

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00017</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1046.80</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	1046.80
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
1046.80																						
<p>B. Full Name (Last, First, Middle Initial) DELTA AIRLINES</p> <p>Mailing Address 1629 K ST NW</p> <p>City WASHINGTON State DC Zip Code 20006</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00017M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1046.80</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	1046.80
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
1046.80																						
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00018</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1684.80</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	1684.80
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
1684.80																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td style="text-align: center;">2731.60</td> </tr> </table>	2731.60
2731.60		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td style="height: 20px;"></td> </tr> </table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1429 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) DELTA AIRLINES Mailing Address 1629 K ST NW City WASHINGTON State DC Zip Code 20006 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00018M Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	Amount of Each Disbursement this Period 1684.80 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00019 Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	Amount of Each Disbursement this Period 3253.12 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) AMERICAN AIRLINES Mailing Address DEPARTMENT 13175 P O BOX 13691 City NEWARK State NJ Zip Code 07188 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00019M Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	Amount of Each Disbursement this Period 3253.12 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	3253.12
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1430 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00020</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3658.80</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	3658.80
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
3658.80																						
<p>B. Full Name (Last, First, Middle Initial) UNITED AIRLINES</p> <p>Mailing Address PO BOX 2013</p> <p>City CHICAGO State IL Zip Code 60673</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00020M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3658.80</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	3658.80
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
3658.80																						
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement BAGGAGE SVS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00021</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">21.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	21.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
21.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

3679.80

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)

PAGE 1431 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VIRGIN AMERICA INC</p> <p>Mailing Address 555 AIRPORT BLVD FL 2ND</p> <p>City BURLINGAME State CA Zip Code 94010</p> <p>Purpose of Disbursement BAGGAGE SVS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00021M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">21.00</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	21.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
21.00																						
<p>B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement BAGGAGE SVS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00022</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">139.60</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	139.60
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
139.60																						
<p>C. Full Name (Last, First, Middle Initial) VIRGIN AMERICA INC</p> <p>Mailing Address 555 AIRPORT BLVD FL 2ND</p> <p>City BURLINGAME State CA Zip Code 94010</p> <p>Purpose of Disbursement BAGGAGE SVS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00022M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">139.60</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	139.60
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
139.60																						

SUBTOTAL of Disbursements This Page (optional) ▶

139.60

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)

PAGE 1432 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement CAR WASH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00023</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">28.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		28.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
28.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) MR CLEAN CAR WASH</p> <p>Mailing Address 11775 HOLLY AUTO CENTER</p> <p>City WALDORF State MD Zip Code 20602</p> <p>Purpose of Disbursement CAR WASH</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00023M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">28.00</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		28.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
28.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement CLEANING SVS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00024</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">34.10</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		34.10
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
34.10																						

SUBTOTAL of Disbursements This Page (optional)	62.10
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SENATE CLEANERS, INC	Transaction ID: 2009M04L21A00024M
	Mailing Address 300 M ST SW	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City WASHINGTON State DC Zip Code 20024	Amount of Each Disbursement this Period 34.10
	Purpose of Disbursement CLEANING SVS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: 2009M04L21A00025
	Mailing Address PO BOX 1270	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City NEWARK State NJ Zip Code 07101-1270	Amount of Each Disbursement this Period 320.82
	Purpose of Disbursement LODGING Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) THE O'HARE HILTON, IL	Transaction ID: 2009M04L21A00025M
	Mailing Address P O BOX 66414	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City AMF OHARE State IL Zip Code 60666-0414	Amount of Each Disbursement this Period 320.82
	Purpose of Disbursement LODGING Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	320.82
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00026</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">2.40</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		2.40
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
2.40																						
<p>B. Full Name (Last, First, Middle Initial) STARBUCKS, LOS ANGELES CA</p> <p>Mailing Address 930 WILSHIRE BLVD</p> <p>City LOS ANGELES State CA Zip Code 90017-3400</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00026M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">2.40</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		2.40
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
2.40																						
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00027</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">3.38</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		3.38
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
3.38																						

SUBTOTAL of Disbursements This Page (optional)	5.78
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BURGER KING, GLEN BURNIE MD <hr/> Mailing Address 7988 CRAIN HWY S <hr/> City GLEN BURNIE State MD Zip Code 21061 <hr/> Purpose of Disbursement MEALS Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00027M Date of Disbursement 03 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 3.38 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS <hr/> Mailing Address PO BOX 1270 <hr/> City NEWARK State NJ Zip Code 07101-1270 <hr/> Purpose of Disbursement MEALS Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00028 Date of Disbursement 03 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 3.99 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) CPK T3 LAX, LOS ANGELES <hr/> Mailing Address 201 WORLD WAY <hr/> City LOS ANGELES State CA Zip Code 90045 <hr/> Purpose of Disbursement MEALS Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00028M Date of Disbursement 03 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 3.99 <hr/> [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	3.99
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS <hr/> Mailing Address PO BOX 1270 <hr/> City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement MEALS Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00029 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">7.45</div>
B.	Full Name (Last, First, Middle Initial) STARBUCKS, WASHINGTON DC <hr/> Mailing Address 237 PENN AVE SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement MEALS Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00029M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">7.45</div> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS <hr/> Mailing Address PO BOX 1270 <hr/> City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement MEALS Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00030 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">7.63</div>

SUBTOTAL of Disbursements This Page (optional)	15.08
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1437 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) NATHANS FAMOUS HOTDOGS, NY</p> <p>Mailing Address 2 PENN PLZ</p> <p>City NEW YORK State NY Zip Code 10121-0101</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00030M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">7.63</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	9		7.63
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	9														
7.63																						
<p>B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00031</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">9.62</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	9		9.62
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	9														
9.62																						
<p>C. Full Name (Last, First, Middle Initial) MAIN SAM SNEAD'S TAVERN</p> <p>Mailing Address 1000 TURNAGE BLVD</p> <p>City WEST PALM BEACH State FL Zip Code 33406</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00031M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">9.62</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	9		9.62
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	9														
9.62																						

SUBTOTAL of Disbursements This Page (optional)	9.62
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1438 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00032</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">10.36</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		10.36
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
10.36																						
<p>B. Full Name (Last, First, Middle Initial) DEWEY & LEBOEUF, NEW YORK</p> <p>Mailing Address 1301 AVE OF THE AMERICAS</p> <p>City NEW YORK State NY Zip Code 10019</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00032M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">10.36</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		10.36
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
10.36																						
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00033</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">11.55</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		11.55
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
11.55																						

SUBTOTAL of Disbursements This Page (optional)	21.91
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1439 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMTRAK</p> <p>Mailing Address 50 MASS AVE NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00033M</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="11.55"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00034</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.57"/></p>
<p>C. Full Name (Last, First, Middle Initial) CORNER BAKERY, WASHINGTON DC</p> <p>Mailing Address 529 14TH ST NW STE F11</p> <p>City WASHINGTON State DC Zip Code 20045</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00034M</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.57"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12.57"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1440 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00035</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">16.85</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	16.85
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
16.85																						
<p>B. Full Name (Last, First, Middle Initial) CAPITOL CARRY OUT</p> <p>Mailing Address 1ST AND C ST NE</p> <p>City WASHINGTON State DC Zip Code 20010</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00035M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">16.85</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	16.85
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
16.85																						
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00036</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">17.56</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	17.56
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
17.56																						

SUBTOTAL of Disbursements This Page (optional)	34.41
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1441 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AU BON CAFE</p> <p>Mailing Address 706 FRONTAGE RD SW</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00036M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">17.56</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	17.56
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
17.56																						
<p>B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00037</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">20.62</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	20.62
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
20.62																						
<p>C. Full Name (Last, First, Middle Initial) I HOP, LOS ANGELES CA</p> <p>Mailing Address 820 S FLOWER ST</p> <p>City LOS ANGELES State CA Zip Code 90017-4608</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00037M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">20.62</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	20.62
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
20.62																						

SUBTOTAL of Disbursements This Page (optional)	20.62
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1442 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00038</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="22.08"/></p>
<p>B. Full Name (Last, First, Middle Initial) EMELIO, BOISE ID</p> <p>Mailing Address 245 S CAPITOL BLVD</p> <p>City BOISE State ID Zip Code 83702</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00038M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="22.08"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00039</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="24.12"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="46.20"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) COFFEE BEAN & TEA LEAF</p> <p>Mailing Address 801 W 7TH ST</p> <p>City LOS ANGELES State CA Zip Code 90017</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00039M Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 24.12</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00040 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 32.01</p>
<p>C. Full Name (Last, First, Middle Initial) THE BRASSERIED & GRILL, CA</p> <p>Mailing Address 711 S HOPE ST</p> <p>City LOS ANGELES State CA Zip Code 90017-3803</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00040M Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 32.01</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	32.01
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement MEALS Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00041 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 Amount of Each Disbursement this Period 39.24
B.	Full Name (Last, First, Middle Initial) STARBUCKS, ARLINGTON VA Mailing Address 1735 N LYNN ST LBBY 20 City ARLINGTON State VA Zip Code 22209-2019 Purpose of Disbursement MEALS Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00041M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 Amount of Each Disbursement this Period 39.24 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement MEALS Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00042 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 Amount of Each Disbursement this Period 80.00

SUBTOTAL of Disbursements This Page (optional)	119.24
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CONGA ROOM, LOS ANGELES CA</p> <p>Mailing Address 800 W OLYMPIC BLVD 260</p> <p>City LOS ANGELES State CA Zip Code 90017-3403</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00042M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="80.00"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00043</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="225.35"/></p>
<p>C. Full Name (Last, First, Middle Initial) BOBBY VANS GRILLE, WDC</p> <p>Mailing Address 1201 NEW YORK AVE NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00043M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="225.35"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="225.35"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1446 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00044</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
1000.00																						
<p>B. Full Name (Last, First, Middle Initial) MCCORMICK & SCHMICKS, WDC</p> <p>Mailing Address 901 F ST NW</p> <p>City WASHINGTON State DC Zip Code 20004-1417</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00044M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
1000.00																						
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00045</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1487.45</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	1487.45
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
1487.45																						

SUBTOTAL of Disbursements This Page (optional) ▶

2487.45

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1447 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH	Transaction ID: 2009M04L21A00045M
	Mailing Address ONE SOUTH COUNTY ROAD	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period 1487.45
	Purpose of Disbursement MEALS	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: 2009M04L21A00046
	Mailing Address PO BOX 1270	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City NEWARK State NJ Zip Code 07101-1270	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement METRO FARE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) WA METRO ATA	Transaction ID: 2009M04L21A00046M
	Mailing Address 600 5TH ST NW	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City WASHINGTON State DC Zip Code 20001-2610	Amount of Each Disbursement this Period 50.00
	Purpose of Disbursement METRO FARE	[MEMO ITEM]
	Candidate Name	
	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)	50.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1448 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement OFFCIE SUPPLIES Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00047 Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 47.24
B.	Full Name (Last, First, Middle Initial) BED BATH & BEYOND, ARLINGTON Mailing Address 900 ARMY NAVY DR City ARLINGTON State VA Zip Code 22202 Purpose of Disbursement OFFCIE SUPPLIES Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00047M Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 47.24 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement OFFICE SUPPLIES Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____ Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00048 Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 3.99

SUBTOTAL of Disbursements This Page (optional) ▶	51.23
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RITE AID, LOS ANGELES CA	Transaction ID: 2009M04L21A00048M
	Mailing Address 600 W 7TH ST	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City LOS ANGELES State CA Zip Code 90017-3842	Amount of Each Disbursement this Period 3.99
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: 2009M04L21A00049
	Mailing Address PO BOX 1270	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City NEWARK State NJ Zip Code 07101-1270	Amount of Each Disbursement this Period 32.53
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) BEST BUY, ARLINGTON VA	Transaction ID: 2009M04L21A00049M
	Mailing Address 1201 S HAYES SE STE B	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ARLINGTON State VA Zip Code 22202	Amount of Each Disbursement this Period 32.53
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	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)	▶	32.53
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00050</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">85.70</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	85.70
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
85.70																						
<p>B. Full Name (Last, First, Middle Initial) DUNKINDONUTS.COM</p> <p>Mailing Address 150 DEPOT ST</p> <p>City BELLINGHAM State MA Zip Code 02019</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00050M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">85.70</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	85.70
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
85.70																						
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00051</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">159.03</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	159.03
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
159.03																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td style="font-weight: bold;">244.73</td> </tr> </table>	244.73
244.73		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td style="height: 20px;"></td> </tr> </table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1451 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BED BATH & BEYOND, WDC</p> <p>Mailing Address 709 7THST NW</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00051M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">159.03</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	159.03
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
159.03																						
<p>B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00052</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">5.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	5.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
5.00																						
<p>C. Full Name (Last, First, Middle Initial) BOISE CENTRE ON THE GROVE, ID</p> <p>Mailing Address 850 W FRONT ST</p> <p>City BOISE State ID Zip Code 83702</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00052M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">5.00</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	5.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
5.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

5.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement PUBLICATIONS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00053 Date of Disbursement: MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 49.09</p>
<p>B. Full Name (Last, First, Middle Initial) HUDSON NEWS INC, NJ</p> <p>Mailing Address 1 MEADOWLANDS PLZ</p> <p>City EAST RUTHERFORD State NJ Zip Code 07073-2150</p> <p>Purpose of Disbursement PUBLICATIONS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00053M Date of Disbursement: MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 49.09</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement RENEWAL SVS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00054 Date of Disbursement: MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 300.00</p>

SUBTOTAL of Disbursements This Page (optional)	349.09
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement RENEWAL SVS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00054M Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	Amount of Each Disbursement this Period 300.00 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement TOLLS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00055 Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	Amount of Each Disbursement this Period 25.00

C. Full Name (Last, First, Middle Initial) MD DEPT OF TRANSPORTATION Mailing Address 300 AUTHORITY DR City DUNDALK State MD Zip Code 21222-2200 Purpose of Disbursement TOLLS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00055M Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	Amount of Each Disbursement this Period 25.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	25.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1454 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement TRAIN FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00056 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 526.00</p>
<p>B. Full Name (Last, First, Middle Initial) AMTRAK</p> <p>Mailing Address 50 MASS AVE NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement TRAIN FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00056M Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 526.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement TRAVEL SERVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00057 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 70.00</p>

SUBTOTAL of Disbursements This Page (optional)	596.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1455 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MACNAIR TRAVEL MANAGEMENT Mailing Address 1101 KING ST SUITE 190 City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement TRAVEL SERVICE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00057M Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009
	Amount of Each Disbursement this Period 70.00 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) AMERICAN EXPRESS Mailing Address PO BOX 1270 City NEWARK State NJ Zip Code 07101-1270 Purpose of Disbursement TRAVEL SERVICE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00058 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009
	Amount of Each Disbursement this Period 90.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) MACNAIR TRAVEL MANAGEMENT Mailing Address 1101 KING ST SUITE 190 City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement TRAVEL SERVICE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00058M Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009
	Amount of Each Disbursement this Period 90.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

90.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1456 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement TRAVEL SERVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00059</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">140.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	140.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
140.00																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) MACNAIR TRAVEL MANAGEMENT</p> <p>Mailing Address 1101 KING ST SUITE 190</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement TRAVEL SERVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00059M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">140.00</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	140.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
140.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) AMERICAN EXPRESS</p> <p>Mailing Address PO BOX 1270</p> <p>City NEWARK State NJ Zip Code 07101-1270</p> <p>Purpose of Disbursement TRAVEL SERVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00060</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">210.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	210.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
210.00																						

SUBTOTAL of Disbursements This Page (optional)	350.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MACNAIR TRAVEL MANAGEMENT</p> <p>Mailing Address 1101 KING ST SUITE 190</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement TRAVEL SERVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00060M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">210.00</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	210.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
210.00																						
<p>B. Full Name (Last, First, Middle Initial) SAUL ANUZIS</p> <p>Mailing Address 5 LOCUST LANE</p> <p>City LANSING State MI Zip Code 48911</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00061</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">336.40</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	0	9	336.40
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	0	9													
336.40																						
<p>C. Full Name (Last, First, Middle Initial) NORTHWEST AIRLINES</p> <p>Mailing Address 4000 E SKY HARBOR BLVD</p> <p>City PHOENIX State AZ Zip Code 85034</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00061M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">336.40</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	0	9	336.40
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	0	9													
336.40																						

SUBTOTAL of Disbursements This Page (optional) ▶

336.40

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SAUL ANUZIS	Transaction ID: 2009M04L21A00062
	Mailing Address 5 LOCUST LANE	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City LANSING State MI Zip Code 48911	Amount of Each Disbursement this Period 668.50
	Purpose of Disbursement AIR FARE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) NORTHWEST AIRLINES	Transaction ID: 2009M04L21A00062M
	Mailing Address 4000 E SKY HARBOR BLVD	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City PHOENIX State AZ Zip Code 85034	Amount of Each Disbursement this Period 668.50
	Purpose of Disbursement AIR FARE	Category/Type
	Candidate Name	
	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:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) SAUL ANUZIS	Transaction ID: 2009M04L21A00063
	Mailing Address 5 LOCUST LANE	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City LANSING State MI Zip Code 48911	Amount of Each Disbursement this Period 797.61
	Purpose of Disbursement LODGING	Category/Type
	Candidate Name	
	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)	▶	1466.11
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) OMNI SHOREHAM HOTEL, WDC	Transaction ID: 2009M04L21A00063M
	Mailing Address 2500 CALVERT ST NW	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period 797.61
	Purpose of Disbursement LODGING	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) SAUL ANUZIS	Transaction ID: 2009M04L21A00064
	Mailing Address 5 LOCUST LANE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City LANSING State MI Zip Code 48911	Amount of Each Disbursement this Period 38.75
	Purpose of Disbursement MEALS	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) TUNE INN, WASHINGTON DC	Transaction ID: 2009M04L21A00064M
	Mailing Address 331 PENN AVE SE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 38.75
	Purpose of Disbursement MEALS	[MEMO ITEM]
	Candidate Name	
	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)	▶	38.75
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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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SAUL ANUZIS</p> <p>Mailing Address 5 LOCUST LANE</p> <p>City LANSING State MI Zip Code 48911</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00065</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="49.86"/></p>
<p>B. Full Name (Last, First, Middle Initial) BERTUCCI'S BRICKOVEN</p> <p>Mailing Address 725 KING STREET</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00065M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="49.86"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) SAUL ANUZIS</p> <p>Mailing Address 5 LOCUST LANE</p> <p>City LANSING State MI Zip Code 48911</p> <p>Purpose of Disbursement TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00066</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="20.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="69.86"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1461 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SAUL ANUZIS	Transaction ID: 2009M04L21A00067
	Mailing Address 5 LOCUST LANE	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City LANSING State MI Zip Code 48911	Amount of Each Disbursement this Period 83.00
	Purpose of Disbursement TAXI	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) SAUL ANUZIS	Transaction ID: 2009M04L21A00068
	Mailing Address 5 LOCUST LANE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LANSING State MI Zip Code 48911	Amount of Each Disbursement this Period 115.00
	Purpose of Disbursement TAXI'S	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BRIAN ATHEY	Transaction ID: 2009M04L21A00069
	Mailing Address 531 NORTHPARK DR	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City BOSSIER CITY State LA Zip Code 71111	Amount of Each Disbursement this Period 83.33
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	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) ▶

281.33

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1462 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BRIAN ATHEY	Transaction ID: 2009M04L21A00070
	Mailing Address 531 NORTHPARK DR	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City BOSSIER CITY State LA Zip Code 71111	Amount of Each Disbursement this Period 83.33
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) BRIAN ATHEY	Transaction ID: 2009M04L21A00071
	Mailing Address 531 NORTHPARK DR	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City BOSSIER CITY State LA Zip Code 71111	Amount of Each Disbursement this Period 83.34
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) AT & T MOBILITY	Transaction ID: 2009M04L21A00072
	Mailing Address P O BOX 6463	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City CAROL STREAM State IL Zip Code 60197	Amount of Each Disbursement this Period 69.97
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	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)	▶	236.64
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1463 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) AT & T MOBILITY Mailing Address P O BOX 6463 City CAROL STREAM State IL Zip Code 60197 Purpose of Disbursement TELEPHONE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 103.94
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) AT & T MOBILITY Mailing Address P O BOX 6463 City CAROL STREAM State IL Zip Code 60197 Purpose of Disbursement TELEPHONE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00074 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 130.66
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) AT & T MOBILITY Mailing Address P O BOX 6463 City CAROL STREAM State IL Zip Code 60197 Purpose of Disbursement TELEPHONE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00075 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 181.71
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	416.31
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) AVIS RENT A CAR SYSTEM, INC. <hr/> Mailing Address 7876 COLLECTIONS CENTER DRIVE <hr/> City CHICAGO State IL Zip Code 60693 Purpose of Disbursement CAR RENTAL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00076 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009
	Amount of Each Disbursement this Period 292.26 Category/Type
B. Full Name (Last, First, Middle Initial) BALFOUR PHOTOGRAPHY <hr/> Mailing Address 2481 MISSION ST <hr/> City SAN MARINO State CA Zip Code 91108 Purpose of Disbursement REPRINTS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00077 Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2009
	Amount of Each Disbursement this Period 31.00 Category/Type
C. Full Name (Last, First, Middle Initial) JAY BANNING <hr/> Mailing Address 2127 CALIFORNIA ST NW APT 205 <hr/> City WASHINGTON State DC Zip Code 20008 Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00078 Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2009
	Amount of Each Disbursement this Period 24.45 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

347.71

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
TUNE INN, WASHINGTON DC

Mailing Address 331 PENN AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00078M
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

24.45

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
JAY BANNING

Mailing Address 2127 CALIFORNIA ST NW
APT 205

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00079
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

90.08

C.

Full Name (Last, First, Middle Initial)
THE PALM RESTAURANT, WDC

Mailing Address 1225 19TH ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00079M
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

90.08

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

90.08

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JAY BANNING</p> <p>Mailing Address 2127 CALIFORNIA ST NW APT 205</p> <p>City WASHINGTON State DC Zip Code 20008</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00080 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 177.14</p>
<p>B. Full Name (Last, First, Middle Initial) LOGAN TAVERN</p> <p>Mailing Address 1423 P ST NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00080M Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 177.14</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) JAY BANNING</p> <p>Mailing Address 2127 CALIFORNIA ST NW APT 205</p> <p>City WASHINGTON State DC Zip Code 20008</p> <p>Purpose of Disbursement PARKING,TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00081 Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 34.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

211.14

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)

PAGE 1467 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JAY BANNING	Transaction ID: 2009M04L21A00082 Date of Disbursement 03 / 05 / 2009
	Mailing Address 2127 CALIFORNIA ST NW APT 205	Amount of Each Disbursement this Period 24.00
	City WASHINGTON State DC Zip Code 20008	
	Purpose of Disbursement TAXI	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JAY BANNING	Transaction ID: 2009M04L21A00083 Date of Disbursement 03 / 05 / 2009
	Mailing Address 2127 CALIFORNIA ST NW APT 205	Amount of Each Disbursement this Period 26.00
	City WASHINGTON State DC Zip Code 20008	
	Purpose of Disbursement TAXI	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BARBIZON LIGHTING COMPANY	Transaction ID: 2009M04L21A00084 Date of Disbursement 03 / 11 / 2009
	Mailing Address BARBIZON CAPITOL INC. 6437-G GENERAL GREEN WAY	Amount of Each Disbursement this Period 786.94
	City ALEXANDRIA State VA Zip Code 22312	
	Purpose of Disbursement CAMERA BATTERIES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	836.94
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)

PAGE 1468 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BARBIZON LIGHTING COMPANY</p> <p>Mailing Address BARBIZON CAPITOL INC. 6437-G GENERAL GREEN WAY</p> <p>City ALEXANDRIA State VA Zip Code 22312</p> <p>Purpose of Disbursement STUDIO LAMPS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00085</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 183.48</p>
<p>B. Full Name (Last, First, Middle Initial) MELISSA BARND</p> <p>Mailing Address 328 D ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00086</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 45.71</p>
<p>C. Full Name (Last, First, Middle Initial) AMAZON.COM</p> <p>Mailing Address P O BOX 81226</p> <p>City SEATTLE State WA Zip Code 98108</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00086M</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 45.71</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

229.19

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) IAN BARTELS</p> <p>Mailing Address 1200 NORTH VEITCH STREET #1612</p> <p>City ARLINGTON State VA Zip Code 22201</p> <p>Purpose of Disbursement INTERNET SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00087 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 59.98</p>
<p>B. Full Name (Last, First, Middle Initial) COMCAST</p> <p>Mailing Address P O BOX 3005</p> <p>City SOUTHEASTERN State PA Zip Code 19398</p> <p>Purpose of Disbursement INTERNET SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00087M Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 59.98</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) LAUREN BATTEY</p> <p>Mailing Address 642 EAST CAPITOL ST NE APT 3</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00088 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 19.80</p>

SUBTOTAL of Disbursements This Page (optional) ▶

79.78

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FIREHOOK BAKERY	Transaction ID: 2009M04L21A00088M Date of Disbursement 03 / 19 / 2009
	Mailing Address 215 PENNSYLVANIA AVE SE	Amount of Each Disbursement this Period 19.80
	City WASHINGTON State DC Zip Code 20004	
	Purpose of Disbursement MEALS	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) LAUREN BATTEY	Transaction ID: 2009M04L21A00089 Date of Disbursement 03 / 05 / 2009
	Mailing Address 642 EAST CAPITOL ST NE APT 3	Amount of Each Disbursement this Period 18.98
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement OFFICE SUPPLIES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS	Transaction ID: 2009M04L21A00089M Date of Disbursement 03 / 05 / 2009
	Mailing Address 404 1ST ST SE	Amount of Each Disbursement this Period 18.98
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement OFFICE SUPPLIES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	18.98
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1471 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BFPE INTERNATIONAL Mailing Address P O BOX 630067 City BALTIMORE State MD Zip Code 21263 Purpose of Disbursement EQUIPMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00090 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 343.69
B. Full Name (Last, First, Middle Initial) BFPE INTERNATIONAL Mailing Address P O BOX 630067 City BALTIMORE State MD Zip Code 21263 Purpose of Disbursement EQUIPMENT MAINTENANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00091 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 475.88
C. Full Name (Last, First, Middle Initial) THE BONJEAN COMPANY Mailing Address 1455 PENNSYLVANIA AVE, NW SUITE 100 City WASHINGTON State DC Zip Code 20004 Purpose of Disbursement ISSUED IN ERROR 2/26/2009 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00092 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period -994.86

SUBTOTAL of Disbursements This Page (optional) ▶

-175.29

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THE BONJEAN COMPANY	Transaction ID: 2009M04L21A00093 Date of Disbursement																			
	Mailing Address 1455 PENNSYLVANIA AVE, NW SUITE 100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ISSUED IN ERROR 2/26/2009	<table border="1"><tr><td colspan="10" style="text-align: center;">-234.37</td></tr></table>	-234.37																		
-234.37																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) THE BONJEAN COMPANY	Transaction ID: 2009M04L21A00094 Date of Disbursement																			
	Mailing Address 1455 PENNSYLVANIA AVE, NW SUITE 100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ISSUED IN ERROR 2/26/2009	<table border="1"><tr><td colspan="10" style="text-align: center;">-105.02</td></tr></table>	-105.02																		
-105.02																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) THE BONJEAN COMPANY	Transaction ID: 2009M04L21A00095 Date of Disbursement																			
	Mailing Address 1455 PENNSYLVANIA AVE, NW SUITE 100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ISSUED IN ERROR 2/26/2009	<table border="1"><tr><td colspan="10" style="text-align: center;">-85.00</td></tr></table>	-85.00																		
-85.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td colspan="10" style="text-align: center;">-424.39</td></tr></table>	-424.39									
-424.39											
TOTAL This Period (last page this line number only)	<table border="1"><tr><td colspan="10" style="text-align: center;"> </td></tr></table>										

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THE BONJEAN COMPANY	Transaction ID: 2009M04L21A00096 Date of Disbursement																			
	Mailing Address 1455 PENNSYLVANIA AVE, NW SUITE 100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ISSUED IN ERROR 2/26/2009	<table border="1"><tr><td>-84.00</td></tr></table>	-84.00																		
-84.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) THE BONJEAN COMPANY	Transaction ID: 2009M04L21A00097 Date of Disbursement																			
	Mailing Address 1455 PENNSYLVANIA AVE, NW SUITE 100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ISSUED IN ERROR 2/26/2009	<table border="1"><tr><td>-75.00</td></tr></table>	-75.00																		
-75.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) THE BONJEAN COMPANY	Transaction ID: 2009M04L21A00098 Date of Disbursement																			
	Mailing Address 1455 PENNSYLVANIA AVE, NW SUITE 100	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ISSUED IN ERROR 2/26/2009	<table border="1"><tr><td>-50.00</td></tr></table>	-50.00																		
-50.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>-209.00</td></tr></table>	-209.00
-209.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SARA BONJEAN</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00099 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 84.00</p>
<p>B. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 5620 UNIVERSITY PKWY</p> <p>City WINSTON SALEM State NC Zip Code 27105</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00099M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 84.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) SARA BONJEAN</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement CAR RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00100 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 994.86</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1078.86

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BGI SHARED SERVICES</p> <p>Mailing Address BUDGET RENT A CAR SYSTEMS, INC 14297 COLLECTIONS CENTER DR</p> <p>City CHICAGO State IL Zip Code 60693</p> <p>Purpose of Disbursement CAR RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00100M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 994.86</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) SARA BONJEAN</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00101 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 14.50</p>
<p>C. Full Name (Last, First, Middle Initial) FIREHOOK BAKERY</p> <p>Mailing Address 215 PENNSYLVANIA AVE SE</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00101M Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 14.50</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

14.50

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SARA BONJEAN <hr/> Mailing Address 500 MONTICELLO BLVD <hr/> City ALEXANDRIA State VA Zip Code 22305 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00102 Date of Disbursement 03 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 25.00 <hr/> Category/Type
B.	Full Name (Last, First, Middle Initial) FIREHOOK BAKERY <hr/> Mailing Address 215 PENNSYLVANIA AVE SE <hr/> City WASHINGTON State DC Zip Code 20004 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00102M Date of Disbursement 03 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 25.00 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) SARA BONJEAN <hr/> Mailing Address 500 MONTICELLO BLVD <hr/> City ALEXANDRIA State VA Zip Code 22305 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00103 Date of Disbursement 03 / 26 / 2009 <hr/> Amount of Each Disbursement this Period 28.82 <hr/> Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	53.82
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1477 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BISTRO ITALIANO, WASHINGTON DC	Transaction ID: 2009M04L21A00103M
	Mailing Address 320 D ST NE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 28.82
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SARA BONJEAN	Transaction ID: 2009M04L21A00104
	Mailing Address 500 MONTICELLO BLVD	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ALEXANDRIA State VA Zip Code 22305	Amount of Each Disbursement this Period 105.02
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) MAIN SAM SNEAD'S TAVERN	Transaction ID: 2009M04L21A00104M
	Mailing Address 1000 TURNAGE BLVD	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WEST PALM BEACH State FL Zip Code 33406	Amount of Each Disbursement this Period 105.02
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

105.02

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SARA BONJEAN</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement MEALS,PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00105</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="234.37"/></p>
<p>B. Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement MEALS,PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00105M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="234.37"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) SARA BONJEAN</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00106</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="75.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="309.37"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1479 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SARA BONJEAN</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00107</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) SARA BONJEAN</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00108</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) SARA BONJEAN</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00109</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="75.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SARA BONJEAN	Transaction ID: 2009M04L21A00110 Date of Disbursement
	Mailing Address 500 MONTICELLO BLVD	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City ALEXANDRIA State VA Zip Code 22305	Amount of Each Disbursement this Period
	Purpose of Disbursement PARKING	<input type="text" value="75.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SARA BONJEAN	Transaction ID: 2009M04L21A00111 Date of Disbursement
	Mailing Address 500 MONTICELLO BLVD	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City ALEXANDRIA State VA Zip Code 22305	Amount of Each Disbursement this Period
	Purpose of Disbursement TAXI	<input type="text" value="12.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SARA BONJEAN	Transaction ID: 2009M04L21A00112 Date of Disbursement
	Mailing Address 500 MONTICELLO BLVD	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City ALEXANDRIA State VA Zip Code 22305	Amount of Each Disbursement this Period
	Purpose of Disbursement TAXI	<input type="text" value="50.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="137.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SARA BONJEAN	Transaction ID: 2009M04L21A00113
	Mailing Address 500 MONTICELLO BLVD	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ALEXANDRIA State VA Zip Code 22305	Amount of Each Disbursement this Period 85.00
	Purpose of Disbursement TIPS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BOWIE'S, INC,	Transaction ID: 2009M04L21A00114
	Mailing Address 1337 E STREET SE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 2196.95
	Purpose of Disbursement TRASH REMOVAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOSH BOWLING	Transaction ID: 2009M04L21A00115
	Mailing Address 1401 N TAFT ST 221	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement PER DIEM	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2381.95

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOSH BOWLING	Transaction ID: 2009M04L21A00116
	Mailing Address 1401 N TAFT ST 221	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement PER DIEM	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOSH BOWLING	Transaction ID: 2009M04L21A00117
	Mailing Address 1401 N TAFT ST 221	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement PER DIEM	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOSH BOWLING	Transaction ID: 2009M04L21A00118
	Mailing Address 1401 N TAFT ST 221	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement PER DIEM	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	300.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PARISH BRADEN	Transaction ID: 2009M04L21A00119 Date of Disbursement																			
	Mailing Address 700 7TH ST SW APT 710	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	9													
	City WASHINGTON State DC Zip Code 20024	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>8.50</td></tr></table>	8.50																		
8.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) REP PARTY OF OREGON	Transaction ID: 2009M04L21A00119M Date of Disbursement																			
	Mailing Address PO BOX 789	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	9													
	City SALEM State OR Zip Code 97308	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>8.50</td></tr></table>	8.50																		
8.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) PARISH BRADEN	Transaction ID: 2009M04L21A00120 Date of Disbursement																			
	Mailing Address 700 7TH ST SW APT 710	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	9													
	City WASHINGTON State DC Zip Code 20024	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>8.51</td></tr></table>	8.51																		
8.51																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>17.01</td></tr></table>	17.01
17.01		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CREPE MAKER Mailing Address 17 S. FT. LAUDERDALE BEACH BLV #112 City FT. LAUDERDALE State FL Zip Code 33316 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00120M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 8.51 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) PARISH BRADEN Mailing Address 700 7TH ST SW APT 710 City WASHINGTON State DC Zip Code 20024 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00121 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 14.41 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) STARBUCKS, ARLINGTON VA Mailing Address 1735 N LYNN ST LBBY 20 City ARLINGTON State VA Zip Code 22209-2019 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00121M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 14.41 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	14.41
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PARISH BRADEN</p> <p>Mailing Address 700 7TH ST SW APT 710</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00122</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="70.21"/></p>
<p>B. Full Name (Last, First, Middle Initial) BULLFEATHERS, WASHINGTON DC</p> <p>Mailing Address 410 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00122M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="70.21"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) PARISH BRADEN</p> <p>Mailing Address 700 7TH ST SW APT 710</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00123</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3.50"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="73.71"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1486 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PARISH BRADEN	Transaction ID: 2009M04L21A00124 Date of Disbursement																			
	Mailing Address 700 7TH ST SW APT 710	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20024	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TAXI	<table border="1"><tr><td>8.25</td></tr></table>	8.25																		
8.25																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) PARISH BRADEN	Transaction ID: 2009M04L21A00125 Date of Disbursement																			
	Mailing Address 700 7TH ST SW APT 710	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20024	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TAXI	<table border="1"><tr><td>12.00</td></tr></table>	12.00																		
12.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) PARISH BRADEN	Transaction ID: 2009M04L21A00126 Date of Disbursement																			
	Mailing Address 700 7TH ST SW APT 710	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20024	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TAXI	<table border="1"><tr><td>21.00</td></tr></table>	21.00																		
21.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional) ▶

41.25

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PARISH BRADEN</p> <p>Mailing Address 700 7TH ST SW APT 710</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00127</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">23.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	0	9	23.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	0	9													
23.00																						
<p>B. Full Name (Last, First, Middle Initial) PARISH BRADEN</p> <p>Mailing Address 700 7TH ST SW APT 710</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00128</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">37.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	0	9	37.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	0	9													
37.00																						
<p>C. Full Name (Last, First, Middle Initial) PARISH BRADEN</p> <p>Mailing Address 700 7TH ST SW APT 710</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00129</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">80.65</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	80.65
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
80.65																						

SUBTOTAL of Disbursements This Page (optional) ▶

140.65

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement CATERING,LODGING,A/V RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00130 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 10660.29</p>
<p>B. Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement CATERING,LODGING,A/V RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00131 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 10660.29</p>
<p>C. Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement CATERING,LODGING,A/V RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00132 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 10660.29</p>

SUBTOTAL of Disbursements This Page (optional)	31980.87
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1489 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) B SMITH INTERIORS	Transaction ID: 2009M04L21A00133 Date of Disbursement
	Mailing Address 2000 CONNECTICUT AVE NW SUITE 413	<input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period <input type="text" value="132.18"/>
	Purpose of Disbursement BUILDING MAINTENANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value=""/> Category/Type
B.	Full Name (Last, First, Middle Initial) B SMITH INTERIORS	Transaction ID: 2009M04L21A00134 Date of Disbursement
	Mailing Address 2000 CONNECTICUT AVE NW SUITE 413	<input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period <input type="text" value="544.88"/>
	Purpose of Disbursement BUILDING MAINTENANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value=""/> Category/Type
C.	Full Name (Last, First, Middle Initial) B SMITH INTERIORS	Transaction ID: 2009M04L21A00135 Date of Disbursement
	Mailing Address 2000 CONNECTICUT AVE NW SUITE 413	<input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period <input type="text" value="3109.07"/>
	Purpose of Disbursement BUILDING MAINTENANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value=""/> Category/Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3786.13"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

**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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) B SMITH INTERIORS	Transaction ID: 2009M04L21A00136 Date of Disbursement
	Mailing Address 2000 CONNECTICUT AVE NW SUITE 413	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period
	Purpose of Disbursement BUILDING MAINTENANCE	<input type="text" value="3338.76"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) B SMITH INTERIORS	Transaction ID: 2009M04L21A00137 Date of Disbursement
	Mailing Address 2000 CONNECTICUT AVE NW SUITE 413	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period
	Purpose of Disbursement BUILDING MAINTENANCE	<input type="text" value="6047.02"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) B SMITH INTERIORS	Transaction ID: 2009M04L21A00138 Date of Disbursement
	Mailing Address 2000 CONNECTICUT AVE NW SUITE 413	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20008	Amount of Each Disbursement this Period
	Purpose of Disbursement BUILDING MAINTENANCE	<input type="text" value="8614.78"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="18000.56"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BUDGET RENT A CAR SYSTEMS, INC	Transaction ID: 2009M04L21A00139
	Mailing Address DAMAGE CLAIMS DEPT PO BOX 403962	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 42.69
	Purpose of Disbursement CAR RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BUDGET RENT A CAR SYSTEMS, INC	Transaction ID: 2009M04L21A00140
	Mailing Address DAMAGE CLAIMS DEPT PO BOX 403962	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 248.44
	Purpose of Disbursement CAR RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BUDGET RENT A CAR SYSTEMS, INC	Transaction ID: 2009M04L21A00141
	Mailing Address DAMAGE CLAIMS DEPT PO BOX 403962	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 326.95
	Purpose of Disbursement CAR RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	618.08
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BUDGET RENT A CAR SYSTEMS,INC	Transaction ID: 2009M04L21A00142 Date of Disbursement																			
	Mailing Address DAMAGE CLAIMS DEPT PO BOX 403962	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CAR RENTAL	<table border="1"><tr><td>405.06</td></tr></table>	405.06																		
405.06																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) BUDGET RENT A CAR SYSTEMS,INC	Transaction ID: 2009M04L21A00143 Date of Disbursement																			
	Mailing Address DAMAGE CLAIMS DEPT PO BOX 403962	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CAR RENTAL	<table border="1"><tr><td>665.80</td></tr></table>	665.80																		
665.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) BUDGET RENT A CAR SYSTEMS,INC	Transaction ID: 2009M04L21A00144 Date of Disbursement																			
	Mailing Address DAMAGE CLAIMS DEPT PO BOX 403962	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CAR RENTAL	<table border="1"><tr><td>728.94</td></tr></table>	728.94																		
728.94																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1799.80</td></tr></table>	1799.80
1799.80		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1493 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DAVID BURKE	Transaction ID: 2009M04L21A00145 Date of Disbursement
	Mailing Address P O BOX 2846	<input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WESTPORT State CT Zip Code 68803	Amount of Each Disbursement this Period
	Purpose of Disbursement AIR FARE	<input type="text" value="679.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: 2009M04L21A00145M Date of Disbursement
	Mailing Address 5620 UNIVERSITY PKWY	<input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WINSTON SALEM State NC Zip Code 27105	Amount of Each Disbursement this Period
	Purpose of Disbursement AIR FARE	<input type="text" value="679.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DAVID BURKE	Transaction ID: 2009M04L21A00146 Date of Disbursement
	Mailing Address P O BOX 2846	<input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WESTPORT State CT Zip Code 68803	Amount of Each Disbursement this Period
	Purpose of Disbursement MEALS	<input type="text" value="4.42"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="683.62"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1494 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DUNKIN DONUTS, FLUSHING NY</p> <p>Mailing Address PA ADMINISTRATION BLDG</p> <p>City FLUSHING State NY Zip Code 01371</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00146M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">4.42</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	9		4.42
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	9														
4.42																						
<p>B. Full Name (Last, First, Middle Initial) DAVID BURKE</p> <p>Mailing Address P O BOX 2846</p> <p>City WESTPORT State CT Zip Code 68803</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00147</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">6.59</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	9		6.59
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	9														
6.59																						
<p>C. Full Name (Last, First, Middle Initial) ORGANIC TO GO</p> <p>Mailing Address 927 15TH ST NW</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00147M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">6.59</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	9		6.59
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	9														
6.59																						

SUBTOTAL of Disbursements This Page (optional)	6.59
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DAVID BURKE	Transaction ID: 2009M04L21A00148 Date of Disbursement 03 / 05 / 2009	
	Mailing Address P O BOX 2846		
	City WESTPORT State CT Zip Code 68803	Amount of Each Disbursement this Period	2.00
	Purpose of Disbursement OFFICE SUPPLIES		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) USA TODAY, FLUSHING NY	Transaction ID: 2009M04L21A00148M Date of Disbursement 03 / 05 / 2009	
	Mailing Address PA ADMINISTRATION BLDG HUNGAR 7C		
	City FLUSHING State NY Zip Code 11371	Amount of Each Disbursement this Period	2.00
	Purpose of Disbursement OFFICE SUPPLIES		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
		[MEMO ITEM]	
C.	Full Name (Last, First, Middle Initial) DAVID BURKE	Transaction ID: 2009M04L21A00149 Date of Disbursement 03 / 05 / 2009	
	Mailing Address P O BOX 2846		
	City WESTPORT State CT Zip Code 68803	Amount of Each Disbursement this Period	44.00
	Purpose of Disbursement TAXI		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional)	46.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MATTHEW BURNS</p> <p>Mailing Address 250 6TH STREET EAST #432</p> <p>City ST PAUL State MN Zip Code 55101</p> <p>Purpose of Disbursement CONSULTING-SPEECH WRITING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00150 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) CAMPAIGN SOLUTIONS/THE</p> <p>Mailing Address DONATELLI GROUP 118 NORTH SAINT ASAPH STREET</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement GRAPHIC SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00151 Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 2800.00</p>
<p>C. Full Name (Last, First, Middle Initial) CAMPAIGN SOLUTIONS/THE</p> <p>Mailing Address DONATELLI GROUP 118 NORTH SAINT ASAPH STREET</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement LIST RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00152 Date of Disbursement 03 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 15000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

22800.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB Mailing Address 300 FIRST STREET, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement CATERING COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00153 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 146.68 Category/Type

B. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB Mailing Address 300 FIRST STREET, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement CATERING COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00154 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 528.00 Category/Type

C. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB Mailing Address 300 FIRST STREET, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00155 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 34.08 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	708.76
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00156
Date of Disbursement

/ /

Amount of Each Disbursement this Period

91.51

B.

Full Name (Last, First, Middle Initial)
CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00157
Date of Disbursement

/ /

Amount of Each Disbursement this Period

146.68

C.

Full Name (Last, First, Middle Initial)
CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00158
Date of Disbursement

/ /

Amount of Each Disbursement this Period

342.01

SUBTOTAL of Disbursements This Page (optional) ▶

580.20

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1499 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB	Transaction ID: 2009M04L21A00159 Date of Disbursement																			
	Mailing Address 300 FIRST STREET, SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>378.83</td></tr></table>	378.83																		
378.83																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES	Transaction ID: 2009M04L21A00160 Date of Disbursement																			
	Mailing Address 200 C. STREET SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LODGING	<table border="1"><tr><td>204.96</td></tr></table>	204.96																		
204.96																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES	Transaction ID: 2009M04L21A00161 Date of Disbursement																			
	Mailing Address 200 C. STREET SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LODGING	<table border="1"><tr><td>204.96</td></tr></table>	204.96																		
204.96																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>788.75</td></tr></table>	788.75
788.75		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1500 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES	Transaction ID: 2009M04L21A00162 Date of Disbursement																			
	Mailing Address 200 C. STREET SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LODGING	<table border="1"><tr><td>204.96</td></tr></table>	204.96																		
204.96																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES	Transaction ID: 2009M04L21A00163 Date of Disbursement																			
	Mailing Address 200 C. STREET SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LODGING	<table border="1"><tr><td>204.96</td></tr></table>	204.96																		
204.96																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES	Transaction ID: 2009M04L21A00164 Date of Disbursement																			
	Mailing Address 200 C. STREET SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LODGING	<table border="1"><tr><td>209.00</td></tr></table>	209.00																		
209.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>618.92</td></tr></table>	618.92
618.92		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1501 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES	Transaction ID: 2009M04L21A00165 Date of Disbursement																			
	Mailing Address 200 C. STREET SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LODGING	<table border="1"><tr><td>627.00</td></tr></table>	627.00																		
627.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES	Transaction ID: 2009M04L21A00166 Date of Disbursement																			
	Mailing Address 200 C. STREET SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LODGING	<table border="1"><tr><td>1254.00</td></tr></table>	1254.00																		
1254.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES	Transaction ID: 2009M04L21A00167 Date of Disbursement																			
	Mailing Address 200 C. STREET SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LODGING	<table border="1"><tr><td>1254.00</td></tr></table>	1254.00																		
1254.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3135.00</td></tr></table>	3135.00
3135.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CD INC	Transaction ID: 2009M04L21A00168
	Mailing Address P O BOX 1877	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ALEXANDRIA State VA Zip Code 22313	Amount of Each Disbursement this Period 7372.37
	Purpose of Disbursement INTERNET SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CD INC	Transaction ID: 2009M04L21A00169
	Mailing Address P O BOX 1877	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City ALEXANDRIA State VA Zip Code 22313	Amount of Each Disbursement this Period 12205.99
	Purpose of Disbursement INTERNET SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CD INC	Transaction ID: 2009M04L21A00170
	Mailing Address P O BOX 1877	Date of Disbursement MM / DD / YYYY 03 / 25 / 2009
	City ALEXANDRIA State VA Zip Code 22313	Amount of Each Disbursement this Period 17000.00
	Purpose of Disbursement INTERNET SERVICES	Category/ Type
	Candidate Name	
	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)	▶	36578.36
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) C. FORBES, INC	Transaction ID: 2009M04L21A00171
	Mailing Address 12830 WEST CREEK PKWY SUITE J	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City RICHMOND State VA Zip Code 23238	Amount of Each Disbursement this Period 2286.99
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) C. FORBES, INC	Transaction ID: 2009M04L21A00172
	Mailing Address 12830 WEST CREEK PKWY SUITE J	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City RICHMOND State VA Zip Code 23238	Amount of Each Disbursement this Period 2286.99
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) C. FORBES, INC	Transaction ID: 2009M04L21A00173
	Mailing Address 12830 WEST CREEK PKWY SUITE J	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City RICHMOND State VA Zip Code 23238	Amount of Each Disbursement this Period 2287.00
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	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)	6860.98
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CHAPEL VALLEY LANDSCAPE	Transaction ID: 2009M04L21A00174
	Mailing Address P OO BOX 159	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City State Zip Code WOODBINE MD 21797	Amount of Each Disbursement this Period 515.00
	Purpose of Disbursement LAWNCARE MAINTENANCE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CHIPPEWA VALLEY SCHOOLS	Transaction ID: 2009M04L21A00175
	Mailing Address 19120 CASS AVENUE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City State Zip Code CLINTON TWP MI 48038	Amount of Each Disbursement this Period 159.10
	Purpose of Disbursement TRANSPORTATION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CHIPPEWA VALLEY SCHOOLS	Transaction ID: 2009M04L21A00176
	Mailing Address 19120 CASS AVENUE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City State Zip Code CLINTON TWP MI 48038	Amount of Each Disbursement this Period 159.10
	Purpose of Disbursement TRANSPORTATION	Category/ Type
	Candidate Name	
	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)	833.20
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1505 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) CHIPPEWA VALLEY SCHOOLS Mailing Address 19120 CASS AVENUE City CLINTON TWP State MI Zip Code 48038 Purpose of Disbursement TRANSPORTATION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00177 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 159.10
B. Full Name (Last, First, Middle Initial) CHRYSLER Mailing Address P O BOX 91703 City CHICAGO State IL Zip Code 60693 Purpose of Disbursement VEHICLE LEASING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00178 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 480.00
C. Full Name (Last, First, Middle Initial) CIGNA GROUP INSURANCE Mailing Address LINA PO BOX 13701 City PHILADELPHIA State PA Zip Code 19101 Purpose of Disbursement INSURANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00179 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 339.51

SUBTOTAL of Disbursements This Page (optional) ▶

978.61

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1506 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CIGNA GROUP INSURANCE	Transaction ID: 2009M04L21A00180 Date of Disbursement																			
	Mailing Address LINA PO BOX 13701	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City PHILADELPHIA State PA Zip Code 19101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement INSURANCE	<table border="1"><tr><td>814.89</td></tr></table>	814.89																		
814.89																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) CIGNA GROUP INSURANCE	Transaction ID: 2009M04L21A00181 Date of Disbursement																			
	Mailing Address LINA PO BOX 13701	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City PHILADELPHIA State PA Zip Code 19101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement INSURANCE	<table border="1"><tr><td>1527.81</td></tr></table>	1527.81																		
1527.81																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00182 Date of Disbursement																			
	Mailing Address 7704 LEESBURG PIKE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DATA ENTRY	<table border="1"><tr><td>371.80</td></tr></table>	371.80																		
371.80																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)

2714.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1507 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00183 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA ENTRY	<input type="text" value="403.27"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00184 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA ENTRY	<input type="text" value="8447.54"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00185 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement EQUIPMENT ACCESS	<input type="text" value="620.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9470.81"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1508 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00186 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement EQUIPMENT ACCESS	<input type="text" value="930.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00187 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="17.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00188 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="50.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="997.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00189 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="75.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00190 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="75.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00191 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="75.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="225.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI <hr/> Mailing Address 7704 LEESBURG PIKE <hr/> City FALLS CHURCH State VA Zip Code 22043 <hr/> Purpose of Disbursement FILE MAINTENANCE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00192 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 75.00
B.	Full Name (Last, First, Middle Initial) CMDI <hr/> Mailing Address 7704 LEESBURG PIKE <hr/> City FALLS CHURCH State VA Zip Code 22043 <hr/> Purpose of Disbursement FILE MAINTENANCE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00193 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 100.00
C.	Full Name (Last, First, Middle Initial) CMDI <hr/> Mailing Address 7704 LEESBURG PIKE <hr/> City FALLS CHURCH State VA Zip Code 22043 <hr/> Purpose of Disbursement FILE MAINTENANCE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00194 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 100.00

SUBTOTAL of Disbursements This Page (optional) ▶	275.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00195 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="100.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00196 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="106.86"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00197 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="125.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="331.86"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00198 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="125.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00199 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00200 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="225.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="550.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00201 Date of Disbursement 03 / 26 / 2009
	Mailing Address 7704 LEESBURG PIKE	Amount of Each Disbursement this Period 250.00
	City FALLS CHURCH State VA Zip Code 22043	
	Purpose of Disbursement FILE MAINTENANCE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00202 Date of Disbursement 03 / 05 / 2009
	Mailing Address 7704 LEESBURG PIKE	Amount of Each Disbursement this Period 271.79
	City FALLS CHURCH State VA Zip Code 22043	
	Purpose of Disbursement FILE MAINTENANCE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00203 Date of Disbursement 03 / 26 / 2009
	Mailing Address 7704 LEESBURG PIKE	Amount of Each Disbursement this Period 300.00
	City FALLS CHURCH State VA Zip Code 22043	
	Purpose of Disbursement FILE MAINTENANCE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	821.79
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00204 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="363.36"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00205 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="390.51"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00206 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="532.34"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1286.21"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00207 Date of Disbursement 03 / 26 / 2009
	Mailing Address 7704 LEESBURG PIKE	Amount of Each Disbursement this Period 650.94
	City FALLS CHURCH State VA Zip Code 22043	
	Purpose of Disbursement FILE MAINTENANCE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00208 Date of Disbursement 03 / 26 / 2009
	Mailing Address 7704 LEESBURG PIKE	Amount of Each Disbursement this Period 853.38
	City FALLS CHURCH State VA Zip Code 22043	
	Purpose of Disbursement FILE MAINTENANCE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00209 Date of Disbursement 03 / 26 / 2009
	Mailing Address 7704 LEESBURG PIKE	Amount of Each Disbursement this Period 854.50
	City FALLS CHURCH State VA Zip Code 22043	
	Purpose of Disbursement FILE MAINTENANCE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2358.82
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00210 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="1046.33"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00211 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="3048.44"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00212 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="3299.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7393.83"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00213 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="3508.68"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00214 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="4333.24"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00215 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="7634.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="15475.92"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00216 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="8081.88"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00217 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="9718.52"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00218 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="11813.16"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="29613.56"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00219 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement FILE MAINTENANCE	<input type="text" value="38873.82"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00220 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST EXCHANGE	<input type="text" value="165.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00221 Date of Disbursement
	Mailing Address 7704 LEESBURG PIKE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement LIST EXCHANGE	<input type="text" value="223.44"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00222
	Mailing Address 7704 LEESBURG PIKE	Date of Disbursement 03 / 26 / 2009
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period 410.00
	Purpose of Disbursement LIST EXCHANGE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: 2009M04L21A00223
	Mailing Address 7704 LEESBURG PIKE	Date of Disbursement 03 / 26 / 2009
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period 2016.34
	Purpose of Disbursement STORAGE COST	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) COGNITIVE DATA, INC	Transaction ID: 2009M04L21A00224
	Mailing Address PMB 132 300 S. RODNEY PARHAM RD,STE 1	Date of Disbursement 03 / 30 / 2009
	City LITTLE ROCK State AR Zip Code 72205	Amount of Each Disbursement this Period 628.62
	Purpose of Disbursement DATA PROCESSING	Category/Type
	Candidate Name	
	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) ▶

3054.96

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) COGNITIVE DATA, INC	Transaction ID: 2009M04L21A00225 Date of Disbursement
	Mailing Address PMB 132 300 S. RODNEY PARHAM RD,STE 1	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City LITTLE ROCK State AR Zip Code 72205	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="1321.38"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) COGNITIVE DATA, INC	Transaction ID: 2009M04L21A00226 Date of Disbursement
	Mailing Address PMB 132 300 S. RODNEY PARHAM RD,STE 1	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City LITTLE ROCK State AR Zip Code 72205	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="1690.10"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) COGNITIVE DATA, INC	Transaction ID: 2009M04L21A00227 Date of Disbursement
	Mailing Address PMB 132 300 S. RODNEY PARHAM RD,STE 1	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City LITTLE ROCK State AR Zip Code 72205	Amount of Each Disbursement this Period
	Purpose of Disbursement DATA PROCESSING	<input type="text" value="4430.88"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7442.36"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) COLD HARBOR FILMS	Transaction ID: 2009M04L21A00228
	Mailing Address 815 SLATERS LANE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 5536.58
	Purpose of Disbursement VIDEO PRODUCTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) COMCAST	Transaction ID: 2009M04L21A00229
	Mailing Address P O BOX 3005	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City SOUTHEASTERN State PA Zip Code 19398	Amount of Each Disbursement this Period 1389.49
	Purpose of Disbursement CABLE TV SERVICE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) COMCAST	Transaction ID: 2009M04L21A00230
	Mailing Address P O BOX 30005	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City SOUTHEASTERN State PA Zip Code 19398-3005	Amount of Each Disbursement this Period 84.26
	Purpose of Disbursement CABLE TV SERVICE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

7010.33

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00231 Date of Disbursement																			
	Mailing Address OF AMERICA 13195 FREEDOM WAY	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City BOSTON State VA Zip Code 22713	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAPER SUPPLY	<table border="1"><tr><td>10878.13</td></tr></table>	10878.13																		
10878.13																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00232 Date of Disbursement																			
	Mailing Address OF AMERICA 13195 FREEDOM WAY	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	0	9												
	City BOSTON State VA Zip Code 22713	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POSTAGE	<table border="1"><tr><td>180.00</td></tr></table>	180.00																		
180.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00233 Date of Disbursement																			
	Mailing Address OF AMERICA 13195 FREEDOM WAY	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	0	9												
	City BOSTON State VA Zip Code 22713	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POSTAGE	<table border="1"><tr><td>16251.03</td></tr></table>	16251.03																		
16251.03																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>27309.16</td></tr></table>	27309.16
27309.16		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00234 Date of Disbursement																			
	Mailing Address OF AMERICA 13195 FREEDOM WAY	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	3		2	0	0	9												
	City BOSTON State VA Zip Code 22713	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POSTAGE	<table border="1"><tr><td>334971.67</td></tr></table>	334971.67																		
334971.67																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00235 Date of Disbursement																			
	Mailing Address OF AMERICA 13195 FREEDOM WAY	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City BOSTON State VA Zip Code 22713	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINT,MAIL PRODUCTION	<table border="1"><tr><td>16354.65</td></tr></table>	16354.65																		
16354.65																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00236 Date of Disbursement																			
	Mailing Address OF AMERICA 13195 FREEDOM WAY	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City BOSTON State VA Zip Code 22713	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINT,MAIL PRODUCTION	<table border="1"><tr><td>197709.00</td></tr></table>	197709.00																		
197709.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>549035.32</td></tr></table>	549035.32
549035.32		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1525 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) COMMUNICATIONS ENGINEERING, INC <hr/> Mailing Address 8500 CINDER BED RD SUITE 100 <hr/> City NEWINGTON State VA Zip Code 22122-8500 <hr/> Purpose of Disbursement EQUIPMENT MAINTENANCE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00237 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 465.30
B. Full Name (Last, First, Middle Initial) COMMUNICATIONS ENGINEERING, INC <hr/> Mailing Address 8500 CINDER BED RD SUITE 100 <hr/> City NEWINGTON State VA Zip Code 22122-8500 <hr/> Purpose of Disbursement EQUIPMENT MAINTENANCE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00238 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 465.30
C. Full Name (Last, First, Middle Initial) COMMUNICATIONS ENGINEERING, INC <hr/> Mailing Address 8500 CINDER BED RD SUITE 100 <hr/> City NEWINGTON State VA Zip Code 22122-8500 <hr/> Purpose of Disbursement EQUIPMENT MAINTENANCE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00239 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 465.30

SUBTOTAL of Disbursements This Page (optional) ▶

1395.90

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1526 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) COMPANY FLOWERS</p> <p>Mailing Address 2107 N. POLLARD STREET</p> <p>City ARLINGTON State VA Zip Code 22207</p> <p>Purpose of Disbursement FLOWERS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00240</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="345.63"/></p>
<p>B. Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS</p> <p>Mailing Address 404 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00241</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="135.33"/></p>
<p>C. Full Name (Last, First, Middle Initial) CONGRESSIONAL LIQUORS</p> <p>Mailing Address 404 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00242</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="157.12"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

638.08

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1527 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BELINDA COOK</p> <p>Mailing Address 113 REMINGTON CRT</p> <p>City CENTREVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00243</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">109.60</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	109.60
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
109.60																						
<p>B. Full Name (Last, First, Middle Initial) SOUTHWEST AIRLINES</p> <p>Mailing Address P O BOX 36611</p> <p>City DALLAS State TX Zip Code 75235</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00243M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">109.60</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	109.60
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
109.60																						
<p>C. Full Name (Last, First, Middle Initial) BELINDA COOK</p> <p>Mailing Address 113 REMINGTON CRT</p> <p>City CENTREVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00244</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">493.60</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	493.60
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
493.60																						

SUBTOTAL of Disbursements This Page (optional) ▶

603.20

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)

PAGE 1528 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) AIRTRAN AIRWAYS Mailing Address 1800 PHOENIX BLVD STE 126 City ATLANTA State GA Zip Code 30349 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00244M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 493.60 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) BELINDA COOK Mailing Address 113 REMINGTON CRT City CENTREVILLE State MD Zip Code 21617 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00245 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 68.95 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) GRAULS, ANNAPOLIS MD Mailing Address 607 TAYLOR AVE City ANNAPOLIS State MD Zip Code 21401 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00245M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 68.95 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	68.95
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1529 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BELINDA COOK</p> <p>Mailing Address 113 REMINGTON CRT</p> <p>City CENTREVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00246</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="185.13"/></p>
<p>B. Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00246M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="185.13"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) BELINDA COOK</p> <p>Mailing Address 113 REMINGTON CRT</p> <p>City CENTREVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00247</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="243.90"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="429.03"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1530 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SAFEMART, CHESTER MD</p> <p>Mailing Address 1925 MAIN ST</p> <p>City CHESTER State MD Zip Code 21619</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00247M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">243.90</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	9	/	2	0	9		243.90
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	9	/	2	0	9														
243.90																						
<p>B. Full Name (Last, First, Middle Initial) BELINDA COOK</p> <p>Mailing Address 113 REMINGTON CRT</p> <p>City CENTREVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00248</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">20.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	5	/	2	0	9		20.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	0	5	/	2	0	9														
20.00																						
<p>C. Full Name (Last, First, Middle Initial) BELINDA COOK</p> <p>Mailing Address 113 REMINGTON CRT</p> <p>City CENTREVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00249</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">75.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	5	/	2	0	9		75.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	0	5	/	2	0	9														
75.00																						

SUBTOTAL of Disbursements This Page (optional)	95.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1531 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BELINDA COOK	Transaction ID: 2009M04L21A00250
	Mailing Address 113 REMINGTON CRT	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City CENTREVILLE State MD Zip Code 21617	Amount of Each Disbursement this Period 80.00
	Purpose of Disbursement PARKING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BELINDA COOK	Transaction ID: 2009M04L21A00251
	Mailing Address 113 REMINGTON CRT	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City CENTREVILLE State MD Zip Code 21617	Amount of Each Disbursement this Period 21.00
	Purpose of Disbursement TIPS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CORPORATE CARE	Transaction ID: 2009M04L21A00252
	Mailing Address 3530 WEST T. C. JESTER	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City HOUSTON State TX Zip Code 77018-5047	Amount of Each Disbursement this Period 1214.33
	Purpose of Disbursement CARPET CLEANING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1315.33
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CORPORATE CARE	Transaction ID: 2009M04L21A00253 Date of Disbursement																			
	Mailing Address 3530 WEST T. C. JESTER	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City HOUSTON State TX Zip Code 77018-5047	Amount of Each Disbursement this Period																			
	Purpose of Disbursement JANITORIAL SERVICES	<table border="1"><tr><td>6551.85</td></tr></table>	6551.85																		
6551.85																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) COVINGTON & BURLING LLP	Transaction ID: 2009M04L21A00254 Date of Disbursement																			
	Mailing Address 1201 PENNSYLVANIA AVE NW	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LEGAL CONSULTING	<table border="1"><tr><td>6941.33</td></tr></table>	6941.33																		
6941.33																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) COVINGTON & BURLING LLP	Transaction ID: 2009M04L21A00255 Date of Disbursement																			
	Mailing Address 1201 PENNSYLVANIA AVE NW	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period																			
	Purpose of Disbursement LEGAL CONSULTING	<table border="1"><tr><td>10009.15</td></tr></table>	10009.15																		
10009.15																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>23502.33</td></tr></table>	23502.33
23502.33		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) COVINGTON & BURLING LLP	Transaction ID: 2009M04L21A00256
	Mailing Address 1201 PENNSYLVANIA AVE NW	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period 16928.72
	Purpose of Disbursement LEGAL CONSULTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) COVINGTON & BURLING LLP	Transaction ID: 2009M04L21A00257
	Mailing Address 1201 PENNSYLVANIA AVE NW	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City WASHINGTON State DC Zip Code 20004	Amount of Each Disbursement this Period 23655.76
	Purpose of Disbursement LEGAL CONSULTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CRAWFORD COMMUNICATIONS, INC.	Transaction ID: 2009M04L21A00258
	Mailing Address ATTN: ACCOUNTS RECEIVABLE 3845 PLEASANTDALE RD	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ATLANTA State GA Zip Code 30340	Amount of Each Disbursement this Period 990.00
	Purpose of Disbursement SATELLITE SERVICES	Category/Type
	Candidate Name	
	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)	41574.48
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) THE OCEANAIRE</p> <p>Mailing Address 1201 F STREET,NW</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00261M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">439.28</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	9	/	2	0	0	9	439.28
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	9	/	2	0	0	9													
439.28																						
<p>B. Full Name (Last, First, Middle Initial) DATAWATCH SYSTEMS, INC</p> <p>Mailing Address P O BOX 79845</p> <p>City BALTIMORE State MD Zip Code 21279</p> <p>Purpose of Disbursement SECURITY MAINTENANCE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00262</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">133.94</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	5	/	2	0	0	9	133.94
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	0	5	/	2	0	0	9													
133.94																						
<p>C. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX</p> <p>Mailing Address PO BOX 96384</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement SALES & USE TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00263</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">2.30</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	2.30
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
2.30																						

SUBTOTAL of Disbursements This Page (optional) ▶

136.24

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX</p> <p>Mailing Address PO BOX 96384</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement SALES & USE TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00264</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">24.93</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	24.93
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
24.93																						
<p>B. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX</p> <p>Mailing Address PO BOX 96384</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement SALES & USE TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00265</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">29.61</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	29.61
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
29.61																						
<p>C. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX</p> <p>Mailing Address PO BOX 96384</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement SALES & USE TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00266</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">43.13</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	43.13
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
43.13																						

SUBTOTAL of Disbursements This Page (optional)	97.67
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1537 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX</p> <p>Mailing Address PO BOX 96384</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement SALES & USE TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00267</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="88.86"/></p>
<p>B. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX</p> <p>Mailing Address PO BOX 96384</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement SALES & USE TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00268</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="120.75"/></p>
<p>C. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX</p> <p>Mailing Address PO BOX 96384</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement SALES & USE TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00269</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="128.41"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

338.02

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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX <hr/> Mailing Address PO BOX 96384 <hr/> City WASHINGTON State DC Zip Code 20090 Purpose of Disbursement SALES & USE TAX Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00270 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 208.09

B. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX <hr/> Mailing Address PO BOX 96384 <hr/> City WASHINGTON State DC Zip Code 20090 Purpose of Disbursement SALES & USE TAX Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00271 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 246.58

C. Full Name (Last, First, Middle Initial) D.C TREASURER SALES & USE TAX <hr/> Mailing Address PO BOX 96384 <hr/> City WASHINGTON State DC Zip Code 20090 Purpose of Disbursement SALES & USE TAX Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00272 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 714.48

SUBTOTAL of Disbursements This Page (optional) ▶	1169.15
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) D.C. TREASURER SALES & USE TAX</p> <p>Mailing Address PO BOX 96384</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement SALES & USE TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00273</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2256.13"/></p>
<p>B. Full Name (Last, First, Middle Initial) D.C. TREASURER</p> <p>Mailing Address REAL PROPERTY TAX BILL PO BOX 98095</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement PROPERTY TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00274</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13213.35"/></p>
<p>C. Full Name (Last, First, Middle Initial) D.C. TREASURER</p> <p>Mailing Address REAL PROPERTY TAX BILL PO BOX 98095</p> <p>City WASHINGTON State DC Zip Code 20090</p> <p>Purpose of Disbursement PROPERTY TAX</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00275</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="159964.65"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

175434.13

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DC WATER & SEWER AUTHORITY	Transaction ID: 2009M04L21A00276 Date of Disbursement 03 / 26 / 2009	
	Mailing Address CUSTOMER SERVICE DEPT. PO BOX 97200		
	City WASHINGTON State DC Zip Code 20090	Amount of Each Disbursement this Period 1733.96	
	Purpose of Disbursement UTILITIES		
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
B.	Full Name (Last, First, Middle Initial) DELL MARKETING L.P.	Transaction ID: 2009M04L21A00277 Date of Disbursement 03 / 26 / 2009	
	Mailing Address C/O DELL USA L.P. PO BOX 643561		
	City PITTSBURGH State PA Zip Code 15264	Amount of Each Disbursement this Period 1144.51	
	Purpose of Disbursement COMPUTER EQUIPMENT		
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		
C.	Full Name (Last, First, Middle Initial) DELL MARKETING L.P.	Transaction ID: 2009M04L21A00278 Date of Disbursement 03 / 11 / 2009	
	Mailing Address C/O DELL USA L.P. PO BOX 643561		
	City PITTSBURGH State PA Zip Code 15264	Amount of Each Disbursement this Period 3118.81	
	Purpose of Disbursement COMPUTER EQUIPMENT		
	Candidate Name 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) ▶

5997.28

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEMAREE'S PUMPING SVC.	Transaction ID: 2009M04L21A00279
	Mailing Address PO BOX 8058	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ROSWELL State NM Zip Code 88202	Amount of Each Disbursement this Period 866.70
	Purpose of Disbursement PORTA JOHNS RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DEMAREE'S PUMPING SVC.	Transaction ID: 2009M04L21A00280
	Mailing Address PO BOX 8058	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ROSWELL State NM Zip Code 88202	Amount of Each Disbursement this Period 1316.10
	Purpose of Disbursement PORTA JOHNS RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DIRECT RESPONSE GROUP	Transaction ID: 2009M04L21A00281
	Mailing Address 2340 E. BEARDSLEY RD SUITE 100	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City PHOENIX State AZ Zip Code 85024	Amount of Each Disbursement this Period 8019.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10201.80
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DIRECT RESPONSE GROUP	Transaction ID: 2009M04L21A00282 Date of Disbursement
	Mailing Address 2340 E. BEARDSLEY RD SUITE 100	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City PHOENIX State AZ Zip Code 85024	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="10131.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRANK DONATELLI	Transaction ID: 2009M04L21A00283 Date of Disbursement
	Mailing Address 831 HERBERT SPRINGS RD	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City ALEXANDRIA State VA Zip Code 22308	Amount of Each Disbursement this Period
	Purpose of Disbursement AIR FARE	<input type="text" value="994.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: 2009M04L21A00283M Date of Disbursement
	Mailing Address 5620 UNIVERSITY PKWY	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City WINSTON SALEM State NC Zip Code 27105	Amount of Each Disbursement this Period
	Purpose of Disbursement AIR FARE	<input type="text" value="994.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="11125.60"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
DONNELLEY MARKETING DIVISION

Mailing Address PO BOX 3603

City OMAHA State NE Zip Code 68103

Purpose of Disbursement
LIST PROCESSING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00284
Date of Disbursement

/ /

Amount of Each Disbursement this Period

920.46

B. Full Name (Last, First, Middle Initial)
DONNELLEY MARKETING DIVISION

Mailing Address PO BOX 3603

City OMAHA State NE Zip Code 68103

Purpose of Disbursement
LIST PROCESSING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00285
Date of Disbursement

/ /

Amount of Each Disbursement this Period

5770.34

C. Full Name (Last, First, Middle Initial)
DONNELLEY MARKETING DIVISION

Mailing Address PO BOX 3603

City OMAHA State NE Zip Code 68103

Purpose of Disbursement
LIST PROCESSING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00286
Date of Disbursement

/ /

Amount of Each Disbursement this Period

35934.90

SUBTOTAL of Disbursements This Page (optional) ▶

42625.70

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DTG OPERATIONS, INC-BOK	Transaction ID: 2009M04L21A00287 Date of Disbursement																			
	Mailing Address THRIFTY CAR RENTAL LOCKBOX 2241	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City TULSA	State OK																			
	Zip Code 74182	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CAR RENTAL	<table border="1"><tr><td>249.13</td></tr></table>	249.13																		
249.13																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) DTG OPERATIONS, INC-BOK	Transaction ID: 2009M04L21A00288 Date of Disbursement																			
	Mailing Address THRIFTY CAR RENTAL LOCKBOX 2241	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City TULSA	State OK																			
	Zip Code 74182	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CAR RENTAL	<table border="1"><tr><td>513.26</td></tr></table>	513.26																		
513.26																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) DTG OPERATIONS, INC-BOK	Transaction ID: 2009M04L21A00289 Date of Disbursement																			
	Mailing Address THRIFTY CAR RENTAL LOCKBOX 2241	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City TULSA	State OK																			
	Zip Code 74182	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CAR RENTAL	<table border="1"><tr><td>1101.16</td></tr></table>	1101.16																		
1101.16																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1863.55</td></tr></table>	1863.55
1863.55		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JIM DYKE	Transaction ID: 2009M04L21A00290 Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 438 KING ST SUITE B	Amount of Each Disbursement this Period 694.70
	City CHARLESTON State SC Zip Code 29403	
	Purpose of Disbursement AIR FARE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: 2009M04L21A00290M Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 5620 UNIVERSITY PKWY	Amount of Each Disbursement this Period 694.70
	City WINSTON SALEM State NC Zip Code 27105	
	Purpose of Disbursement AIR FARE	Category/Type
	Candidate Name	
	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:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) JIM DYKE	Transaction ID: 2009M04L21A00291 Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 438 KING ST SUITE B	Amount of Each Disbursement this Period 694.70
	City CHARLESTON State SC Zip Code 29403	
	Purpose of Disbursement AIR FARE	Category/Type
	Candidate Name	
	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)	▶	1389.40
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1546 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 5620 UNIVERSITY PKWY</p> <p>City WINSTON SALEM State NC Zip Code 27105</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00291M</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>694.70</td> </tr> </table> </p> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	694.70
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
694.70																						
<p>B. Full Name (Last, First, Middle Initial) JIM DYKE</p> <p>Mailing Address 438 KING ST SUITE B</p> <p>City CHARLESTON State SC Zip Code 29403</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00292</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>694.70</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	694.70
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
694.70																						
<p>C. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 5620 UNIVERSITY PKWY</p> <p>City WINSTON SALEM State NC Zip Code 27105</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00292M</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>694.70</td> </tr> </table> </p> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	694.70
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
694.70																						

SUBTOTAL of Disbursements This Page (optional)	694.70
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JIM DYKE</p> <p>Mailing Address 438 KING ST SUITE B</p> <p>City CHARLESTON State SC Zip Code 29403</p> <p>Purpose of Disbursement LODGING,MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00293 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1281.31</p>
<p>B. Full Name (Last, First, Middle Initial) THE METROPOLITAN CLUB</p> <p>Mailing Address OF THE CITY OF WASHINGTON 1700 H ST NW</p> <p>City WASHINGTON State DC Zip Code 20006</p> <p>Purpose of Disbursement LODGING,MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00293M Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1281.31</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) JIM DYKE & ASSOCIATES,INC</p> <p>Mailing Address 438 KING STREET SUITE B</p> <p>City CHARLESTON State SC Zip Code 29403</p> <p>Purpose of Disbursement CONSULTING-STAFF ASSISTANT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00294 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6281.31

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JIM DYKE & ASSOCIATES, INC	Transaction ID: 2009M04L21A00295
	Mailing Address 438 KING STREET SUITE B	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City CHARLESTON State SC Zip Code 29403	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement STAFF CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) E-DONATION.COM	Transaction ID: 2009M04L21A00296
	Mailing Address 118 NORTH SAINT ASAPH STREET	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement BANKING FEES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) E-DONATION.COM	Transaction ID: 2009M04L21A00297
	Mailing Address 118 NORTH SAINT ASAPH STREET	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 275.00
	Purpose of Disbursement BANKING FEES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5425.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JESSICA ENNIS	Transaction ID: 2009M04L21A00298 Date of Disbursement 03 / 26 / 2009
	Mailing Address 116 N CAROLINA AVE SE APT 102	Amount of Each Disbursement this Period 189.20
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement AIR FARE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: 2009M04L21A00298M Date of Disbursement 03 / 26 / 2009
	Mailing Address 5620 UNIVERSITY PKWY	Amount of Each Disbursement this Period 189.20
	City WINSTON SALEM State NC Zip Code 27105	
	Purpose of Disbursement AIR FARE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) JESSICA ENNIS	Transaction ID: 2009M04L21A00299 Date of Disbursement 03 / 26 / 2009
	Mailing Address 116 N CAROLINA AVE SE APT 102	Amount of Each Disbursement this Period 563.50
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement AIR FARE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	752.70
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) EXPEDIA</p> <p>Mailing Address 10190 COVINGTON CROSS DR</p> <p>City LAS VEGAS State NV Zip Code 89144</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00299M</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>563.50</td> </tr> </table> </p> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	9		563.50
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	9														
563.50																						
<p>B. Full Name (Last, First, Middle Initial) EXXON MOBIL</p> <p>Mailing Address PROCESSING CENTER PO BOX 688938</p> <p>City DES MOINES State IA Zip Code 50368</p> <p>Purpose of Disbursement FUEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00300</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>28.53</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	3	0	/	2	0	9		28.53
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	3	0	/	2	0	9														
28.53																						
<p>C. Full Name (Last, First, Middle Initial) EXXON MOBIL</p> <p>Mailing Address PROCESSING CENTER PO BOX 688938</p> <p>City DES MOINES State IA Zip Code 50368</p> <p>Purpose of Disbursement FUEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00301</p> <p>Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>32.71</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	0	5	/	2	0	9		32.71
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	0	5	/	2	0	9														
32.71																						

SUBTOTAL of Disbursements This Page (optional)	61.24
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) EXXON MOBIL	Transaction ID: 2009M04L21A00302 Date of Disbursement 03 / 05 / 2009
	Mailing Address PROCESSING CENTER PO BOX 688938	Amount of Each Disbursement this Period 437.09
	City DES MOINES	State IA
	Zip Code 50368	
	Purpose of Disbursement FUEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) EXXON MOBIL	Transaction ID: 2009M04L21A00303 Date of Disbursement 03 / 30 / 2009
	Mailing Address PROCESSING CENTER PO BOX 688938	Amount of Each Disbursement this Period 463.20
	City DES MOINES	State IA
	Zip Code 50368	
	Purpose of Disbursement FUEL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00304 Date of Disbursement 03 / 11 / 2009
	Mailing Address P O BOX 371461	Amount of Each Disbursement this Period 6.83
	City PITTSBURGH	State PA
	Zip Code 15250	
	Purpose of Disbursement DELIVERY COST	Category/ Type
	Candidate Name	
	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)	907.12
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00305
	Mailing Address P O BOX 371461	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period 8.16
	Purpose of Disbursement DELIVERY COST Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00306
	Mailing Address P O BOX 371461	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period 9.03
	Purpose of Disbursement DELIVERY COST Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00307
	Mailing Address P O BOX 371461	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period 10.47
	Purpose of Disbursement DELIVERY COST Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	27.66
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00308 Date of Disbursement
	Mailing Address P O BOX 371461	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period
	Purpose of Disbursement DELIVERY COST	<input type="text" value="11.08"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00309 Date of Disbursement
	Mailing Address P O BOX 371461	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period
	Purpose of Disbursement DELIVERY COST	<input type="text" value="15.99"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00310 Date of Disbursement
	Mailing Address P O BOX 371461	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period
	Purpose of Disbursement DELIVERY COST	<input type="text" value="17.89"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="44.96"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00311 Date of Disbursement																			
	Mailing Address P O BOX 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELIVERY COST	<table border="1"><tr><td>18.27</td></tr></table>	18.27																		
18.27																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00312 Date of Disbursement																			
	Mailing Address P O BOX 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELIVERY COST	<table border="1"><tr><td>19.25</td></tr></table>	19.25																		
19.25																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00313 Date of Disbursement																			
	Mailing Address P O BOX 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	0	9												
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELIVERY COST	<table border="1"><tr><td>27.25</td></tr></table>	27.25																		
27.25																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional) ►

64.77

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00314
	Mailing Address P O BOX 371461	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period 28.04
	Purpose of Disbursement DELIVERY COST Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00315
	Mailing Address P O BOX 371461	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period 30.60
	Purpose of Disbursement DELIVERY COST Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00316
	Mailing Address P O BOX 371461	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period 36.47
	Purpose of Disbursement DELIVERY COST Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	95.11
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) FED EX Mailing Address P O BOX 371461 City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00317 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 41.00 Category/Type
B. Full Name (Last, First, Middle Initial) FED EX Mailing Address P O BOX 371461 City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00318 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 45.70 Category/Type
C. Full Name (Last, First, Middle Initial) FED EX Mailing Address P O BOX 371461 City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00319 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 48.63 Category/Type

SUBTOTAL of Disbursements This Page (optional)	135.33
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00320 Date of Disbursement																			
	Mailing Address P O BOX 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELIVERY COST	<table border="1"><tr><td>56.64</td></tr></table>	56.64																		
56.64																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00321 Date of Disbursement																			
	Mailing Address P O BOX 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELIVERY COST	<table border="1"><tr><td>83.77</td></tr></table>	83.77																		
83.77																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00322 Date of Disbursement																			
	Mailing Address P O BOX 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELIVERY COST	<table border="1"><tr><td>92.21</td></tr></table>	92.21																		
92.21																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>232.62</td></tr></table>	232.62
232.62		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1558 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) FED EX Mailing Address P O BOX 371461 City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00323 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 114.15
B. Full Name (Last, First, Middle Initial) FED EX Mailing Address P O BOX 371461 City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00324 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 186.57
C. Full Name (Last, First, Middle Initial) FED EX Mailing Address P O BOX 371461 City PITTSBURGH State PA Zip Code 15250 Purpose of Disbursement DELIVERY COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00325 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 449.77

SUBTOTAL of Disbursements This Page (optional)	750.49
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00326 Date of Disbursement																			
	Mailing Address P O BOX 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELIVERY COST	<table border="1"><tr><td>556.71</td></tr></table>	556.71																		
556.71																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00327 Date of Disbursement																			
	Mailing Address P O BOX 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELIVERY COST	<table border="1"><tr><td>695.39</td></tr></table>	695.39																		
695.39																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) FED EX	Transaction ID: 2009M04L21A00328 Date of Disbursement																			
	Mailing Address P O BOX 371461	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City PITTSBURGH State PA Zip Code 15250	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DELIVERY COST	<table border="1"><tr><td>7590.12</td></tr></table>	7590.12																		
7590.12																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>8842.22</td></tr></table>	8842.22
8842.22		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1560 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FEDERAL RESERVE BANK-CLEVELAND	Transaction ID: 2009M04L21A00329 Date of Disbursement																			
	Mailing Address FISCAL DEPT-PAYROLL PO BOX 299	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	0	9												
	City PITTSBURPH State PA Zip Code 15230-0299	Amount of Each Disbursement this Period																			
	Purpose of Disbursement SAVINGS BONDS	<table border="1"><tr><td>800.00</td></tr></table>	800.00																		
800.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) FEDERAL RESERVE BANK-CLEVELAND	Transaction ID: 2009M04L21A00330 Date of Disbursement																			
	Mailing Address FISCAL DEPT-PAYROLL PO BOX 299	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City PITTSBURPH State PA Zip Code 15230-0299	Amount of Each Disbursement this Period																			
	Purpose of Disbursement SAVINGS BONDS	<table border="1"><tr><td>850.00</td></tr></table>	850.00																		
850.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) FILEMAKER, INC.	Transaction ID: 2009M04L21A00331 Date of Disbursement																			
	Mailing Address ATTN:OPERATIONS MSC-55 5201 PATRICK HENRY DRIVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City SANTA CLARA State CA Zip Code 95054	Amount of Each Disbursement this Period																			
	Purpose of Disbursement SOFTWARE	<table border="1"><tr><td>1960.61</td></tr></table>	1960.61																		
1960.61																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3610.61</td></tr></table>	3610.61
3610.61		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JULIE FLEMING</p> <p>Mailing Address 6719 BOSTWICK DRIVE</p> <p>City SPRINGFIELD State VA Zip Code 22151</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00332</p> <p>Date of Disbursement MM / DD / YYYY 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 81.86</p>
<p>B. Full Name (Last, First, Middle Initial) CURRENT</p> <p>Mailing Address 1005 E WOODMEN RD</p> <p>City COLORADO SPRINGS State CO Zip Code 80920</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00332M</p> <p>Date of Disbursement MM / DD / YYYY 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 81.86</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) JULIE FLEMING</p> <p>Mailing Address 6719 BOSTWICK DRIVE</p> <p>City SPRINGFIELD State VA Zip Code 22151</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00333</p> <p>Date of Disbursement MM / DD / YYYY 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 24.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

105.86

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L21A00334 Date of Disbursement 03 / 26 / 2009 <hr/> Amount of Each Disbursement this Period 175.00
B.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L21A00335 Date of Disbursement 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 263.50
C.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L21A00336 Date of Disbursement 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 277.50

SUBTOTAL of Disbursements This Page (optional)	716.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00337 Date of Disbursement
	Mailing Address 7300 HUDSON BLVD SUITE 270	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="296.50"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00338 Date of Disbursement
	Mailing Address 7300 HUDSON BLVD SUITE 270	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="433.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00339 Date of Disbursement
	Mailing Address 7300 HUDSON BLVD SUITE 270	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="730.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1459.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00340 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 820.50
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00341 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 948.91
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00342 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 1685.00
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3454.41
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00343 Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 1713.60
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00344 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 1736.13
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00345 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 2313.00
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	5762.73
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L21A00346 Date of Disbursement 03 / 26 / 2009 <hr/> Amount of Each Disbursement this Period 3669.00
B.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L21A00347 Date of Disbursement 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 6069.60
C.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L21A00348 Date of Disbursement 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 6371.00

SUBTOTAL of Disbursements This Page (optional)	16109.60
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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00349 Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009
	Amount of Each Disbursement this Period 9674.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00350 Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2009
	Amount of Each Disbursement this Period 13068.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00351 Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009
	Amount of Each Disbursement this Period 15504.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

38246.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00352 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 17802.00
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00353 Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 19585.00
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00354 Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 20340.00
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	57727.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00355 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 20700.00
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00356 Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 21561.60
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L21A00357 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	Mailing Address 7300 HUDSON BLVD SUITE 270	Amount of Each Disbursement this Period 23925.00
	City SAINT PAUL State MN Zip Code 55128	
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	66186.60
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L21A00358 Date of Disbursement MM / DD / YYYY 03 / 26 / 2009 <hr/> Amount of Each Disbursement this Period 24108.00
B.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L21A00359 Date of Disbursement MM / DD / YYYY 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 28438.00
C.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC <hr/> Mailing Address 7300 HUDSON BLVD SUITE 270 <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L21A00360 Date of Disbursement MM / DD / YYYY 03 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 29942.40

SUBTOTAL of Disbursements This Page (optional) ▶

82488.40

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) FLS CONNECT, LLC</p> <p>Mailing Address 7300 HUDSON BLVD SUITE 270</p> <p>City SAINT PAUL State MN Zip Code 55128</p> <p>Purpose of Disbursement TELEMARKETING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00361 Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 34500.00</p>
<p>B. Full Name (Last, First, Middle Initial) FLS CONNECT, LLC</p> <p>Mailing Address 7300 HUDSON BLVD SUITE 270</p> <p>City SAINT PAUL State MN Zip Code 55128</p> <p>Purpose of Disbursement TELEMARKETING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00362 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 41774.40</p>
<p>C. Full Name (Last, First, Middle Initial) FLS CONNECT, LLC</p> <p>Mailing Address 7300 HUDSON BLVD SUITE 270</p> <p>City SAINT PAUL State MN Zip Code 55128</p> <p>Purpose of Disbursement TELEMARKETING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00363 Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 45242.40</p>

SUBTOTAL of Disbursements This Page (optional) ▶

121516.80

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FORD MOTOR COMPANY	Transaction ID: 2009M04L21A00364
	Mailing Address PO BOX 70548	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City CHICAGO State IL Zip Code 60673	Amount of Each Disbursement this Period 1400.00
	Purpose of Disbursement VEHICLE LEASING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FOUR SEASONS HOTEL, WDC	Transaction ID: 2009M04L21A00365
	Mailing Address 2800 PENNSYLVANIA AVE NW	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement LODGING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FOUR SEASONS HOTEL, WDC	Transaction ID: 2009M04L21A00366
	Mailing Address 2800 PENNSYLVANIA AVE NW	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period 4000.00
	Purpose of Disbursement LODGING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	8400.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FOUR SEASONS HOTEL, WDC	Transaction ID: 2009M04L21A00367 Date of Disbursement
	Mailing Address 2800 PENNSYLVANIA AVE NW	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement LODGING	<input type="text" value="4000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FOUR SEASONS HOTEL, WDC	Transaction ID: 2009M04L21A00368 Date of Disbursement
	Mailing Address 2800 PENNSYLVANIA AVE NW	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement LODGING	<input type="text" value="4000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FOUR SEASONS RESORT AND CLUB	Transaction ID: 2009M04L21A00369 Date of Disbursement
	Mailing Address AT LAS COLINAS 4150 N. MACARTHUR BLVD	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City IRVING State TX Zip Code 75038	Amount of Each Disbursement this Period
	Purpose of Disbursement LODGING	<input type="text" value="333.33"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8333.33"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FOUR SEASONS RESORT AND CLUB	Transaction ID: 2009M04L21A00370 Date of Disbursement
	Mailing Address AT LAS COLINAS 4150 N. MACARTHUR BLVD	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City IRVING State TX Zip Code 75038	Amount of Each Disbursement this Period
	Purpose of Disbursement LODGING	<input type="text" value="333.33"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FOUR SEASONS RESORT AND CLUB	Transaction ID: 2009M04L21A00371 Date of Disbursement
	Mailing Address AT LAS COLINAS 4150 N. MACARTHUR BLVD	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City IRVING State TX Zip Code 75038	Amount of Each Disbursement this Period
	Purpose of Disbursement LODGING	<input type="text" value="333.34"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FOUR SEASONS RESORT AND CLUB	Transaction ID: 2009M04L21A00372 Date of Disbursement
	Mailing Address AT LAS COLINAS 4150 N. MACARTHUR BLVD	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City IRVING State TX Zip Code 75038	Amount of Each Disbursement this Period
	Purpose of Disbursement VENUE RENTAL	<input type="text" value="1000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1666.67"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) FOUR SEASONS RESORT JACKSON <hr/> Mailing Address HOLE PO BOX 544 <hr/> City TETON VILLAGE State WY Zip Code 83025 <hr/> Purpose of Disbursement LODGING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00373 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00

B. Full Name (Last, First, Middle Initial) FOUR SEASONS RESORT JACKSON <hr/> Mailing Address HOLE PO BOX 544 <hr/> City TETON VILLAGE State WY Zip Code 83025 <hr/> Purpose of Disbursement LODGING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00374 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00

C. Full Name (Last, First, Middle Initial) FOUR SEASONS RESORT JACKSON <hr/> Mailing Address HOLE PO BOX 544 <hr/> City TETON VILLAGE State WY Zip Code 83025 <hr/> Purpose of Disbursement LODGING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00375 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) FOUR SEASONS RESORT JACKSON	Transaction ID: 2009M04L21A00376 Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	Amount of Each Disbursement this Period 1500.00
Mailing Address: HOLE PO BOX 544	
City: TETON VILLAGE State: WY Zip Code: 83025	
Purpose of Disbursement: LODGING Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	

B. Full Name (Last, First, Middle Initial) FRAGER'S HARDWARE	Transaction ID: 2009M04L21A00377 Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	Amount of Each Disbursement this Period 623.53
Mailing Address: 1113-15 PENNSYLLVANIA AVE SE	
City: WASHINGTON State: DC Zip Code: 20003	
Purpose of Disbursement: HARDWARE SUPPLIES Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	

C. Full Name (Last, First, Middle Initial) TED FRANKS	Transaction ID: 2009M04L21A00378 Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	Amount of Each Disbursement this Period 666.65
Mailing Address: 1150 17TH STREET NW	
City: WASHINGTON State: DC Zip Code: 20036	
Purpose of Disbursement: LEGAL CONSULTING Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	

SUBTOTAL of Disbursements This Page (optional) ▶	2790.18
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROSS & MINER, P.C. <hr/> Mailing Address 327 E. FIREWEED LANE SUITE 201 <hr/> City ANCHORAGE State AK Zip Code 99503 <hr/> Purpose of Disbursement LEGAL CONSULTING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00378M Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009 <hr/> Amount of Each Disbursement this Period 666.65 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) GEM LASER EXPRESS <hr/> Mailing Address PO BOX 220292 <hr/> City CHANTILLY State VA Zip Code 20153 <hr/> Purpose of Disbursement PRINTER REPAIR Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00379 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009 <hr/> Amount of Each Disbursement this Period 218.68
C.	Full Name (Last, First, Middle Initial) GRAINGER <hr/> Mailing Address DEPT 811567551 <hr/> City PALATINE State IL Zip Code 60038-0001 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00380 Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2009 <hr/> Amount of Each Disbursement this Period 102.71

SUBTOTAL of Disbursements This Page (optional) ▶	321.39
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GRASSROOTS TARGETING	Transaction ID: 2009M04L21A00381 Date of Disbursement
	Mailing Address 814 KING STREET SUITE 420	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement STAFF CONSULTING	<input type="text" value="15000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GRASSROOTS TARGETING	Transaction ID: 2009M04L21A00382 Date of Disbursement
	Mailing Address 814 KING STREET SUITE 420	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement STAFF CONSULTING	<input type="text" value="15000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BLAISE HAZELWOOD	Transaction ID: 2009M04L21A00383 Date of Disbursement
	Mailing Address 300 QUEEN ST	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement MEALS	<input type="text" value="117.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="30117.90"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CHARLIE PALMER STEAK, WDX</p> <p>Mailing Address 101 CONSTITUTION AVE NW</p> <p>City WASHINGTON State DC Zip Code 20036</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00383M</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="117.90"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) BLAISE HAZELWOOD</p> <p>Mailing Address 300 QUEEN ST</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00384</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) BLAISE HAZELWOOD</p> <p>Mailing Address 300 QUEEN ST</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00385</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMTRAK</p> <p>Mailing Address 50 MASS AVE NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement TRAIN FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00387M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="708.00"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) TODD HERMAN</p> <p>Mailing Address 21025 7TH AVENUE SOUTH</p> <p>City DES MOINES State IA Zip Code 98198</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00388</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="919.20"/></p>
<p>C. Full Name (Last, First, Middle Initial) ALASKA AIRLINES INC</p> <p>Mailing Address 20833 INTERNATIONAL BLVD</p> <p>City SEATTLE State WA Zip Code 98198</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00388M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="919.20"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="919.20"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TODD HERMAN</p> <p>Mailing Address 21025 7TH AVENUE SOUTH</p> <p>City DES MOINES State IA Zip Code 98198</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00389 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 143.13</p>
<p>B. Full Name (Last, First, Middle Initial) FOUR POINTS BY SHERATON WDC</p> <p>Mailing Address 1201 K ST NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00389M Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 143.13</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) NANCY D HIBBS</p> <p>Mailing Address 1005 NEW DAWN LANE</p> <p>City ODENTON State MD Zip Code 21113</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00390 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 203.72</p>

SUBTOTAL of Disbursements This Page (optional) ▶

346.85

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) AMAZON.COM Mailing Address P O BOX 81226 City SEATTLE State WA Zip Code 98108 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00390M Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	Amount of Each Disbursement this Period 203.72 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) NANCY D HIBBS Mailing Address 1005 NEW DAWN LANE City ODENTON State MD Zip Code 21113 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00391 Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	Amount of Each Disbursement this Period 232.70 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) WALMART.COM Mailing Address 7000 MARINA BLVD City BRISBANE State CA Zip Code 94005 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00391M Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	Amount of Each Disbursement this Period 232.70 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	232.70
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HILTON PALACIO DEL RIO	Transaction ID: 2009M04L21A00392
	Mailing Address 200 SOUTH ALAMO	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City SAN ANTONIO State TX Zip Code 78205	Amount of Each Disbursement this Period 3838.74
	Purpose of Disbursement CATERING,LODGING,A/V RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) HOLTZMAN VOGEL, PLLC	Transaction ID: 2009M04L21A00393
	Mailing Address 98 ALEXANDRIA PIKE SUITE 53	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WARRENTON State VA Zip Code 20186	Amount of Each Disbursement this Period 15000.00
	Purpose of Disbursement LEGAL CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00394
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	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) ▶

19138.74

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC <hr/> Mailing Address 2800 SHIRLINGTON RD STE 920 <hr/> City ARLINGTON State VA Zip Code 22206 <hr/> Purpose of Disbursement GRAPHIC SERVICES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00395 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 300.00
B.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC <hr/> Mailing Address 2800 SHIRLINGTON RD STE 920 <hr/> City ARLINGTON State VA Zip Code 22206 <hr/> Purpose of Disbursement GRAPHIC SERVICES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00396 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 300.00
C.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC <hr/> Mailing Address 2800 SHIRLINGTON RD STE 920 <hr/> City ARLINGTON State VA Zip Code 22206 <hr/> Purpose of Disbursement GRAPHIC SERVICES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00397 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 300.00

SUBTOTAL of Disbursements This Page (optional)	900.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00398
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00399
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 400.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00400
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 400.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/Type
	Candidate Name	
	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)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00401
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00402
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00403
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	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)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00404
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00405
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) HOON DESIGNS, LLC	Transaction ID: 2009M04L21A00406
	Mailing Address 2800 SHIRLINGTON RD STE 920	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement GRAPHIC SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	3600.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ICS CORPORATION	Transaction ID: 2009M04L21A00407 Date of Disbursement																			
	Mailing Address 2225 RICHMOND STREET	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	8		2	0	0	9												
	City PHILADELPHIA State PA Zip Code 19125	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POSTAGE	<table border="1"><tr><td>60000.00</td></tr></table>	60000.00																		
60000.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) ICS CORPORATION	Transaction ID: 2009M04L21A00408 Date of Disbursement																			
	Mailing Address 2225 RICHMOND STREET	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City PHILADELPHIA State PA Zip Code 19125	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINT,MAIL PRODUCTION	<table border="1"><tr><td>2286.04</td></tr></table>	2286.04																		
2286.04																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) ICS CORPORATION	Transaction ID: 2009M04L21A00409 Date of Disbursement																			
	Mailing Address 2225 RICHMOND STREET	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City PHILADELPHIA State PA Zip Code 19125	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINT,MAIL PRODUCTION	<table border="1"><tr><td>4572.40</td></tr></table>	4572.40																		
4572.40																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>66858.44</td></tr></table>	66858.44
66858.44		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ICS CORPORATION	Transaction ID: 2009M04L21A00410
	Mailing Address 2225 RICHMOND STREET	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City PHILADELPHIA State PA Zip Code 19125	Amount of Each Disbursement this Period 13082.00
	Purpose of Disbursement PRINT,MAIL PRODUCTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) IGOE/ASSOCIATES	Transaction ID: 2009M04L21A00411
	Mailing Address 7170 BLUEGRASS WAY	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City OWINGS State MD Zip Code 20736	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement STAFF CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) IGOE/ASSOCIATES	Transaction ID: 2009M04L21A00412
	Mailing Address 7170 BLUEGRASS WAY	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City OWINGS State MD Zip Code 20736	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement STAFF CONSULTING	Category/ Type
	Candidate Name	
	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)	23082.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS</p> <p>Mailing Address P O BOX 403846</p> <p>City ATLANTA State GA Zip Code 30384</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00413</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="-36.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS</p> <p>Mailing Address P O BOX 403846</p> <p>City ATLANTA State GA Zip Code 30384</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00414</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="7.46"/></p>
<p>C. Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS</p> <p>Mailing Address P O BOX 403846</p> <p>City ATLANTA State GA Zip Code 30384</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00415</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="29.80"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1.26"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00416
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 30.13
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00417
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 36.00
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00418
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 36.41
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	102.54
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS</p> <p>Mailing Address P O BOX 403846</p> <p>City ATLANTA State GA Zip Code 30384</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00419 Date of Disbursement: 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 37.28</p>
<p>B. Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS</p> <p>Mailing Address P O BOX 403846</p> <p>City ATLANTA State GA Zip Code 30384</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00420 Date of Disbursement: 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 65.16</p>
<p>C. Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS</p> <p>Mailing Address P O BOX 403846</p> <p>City ATLANTA State GA Zip Code 30384</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00421 Date of Disbursement: 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 65.17</p>

SUBTOTAL of Disbursements This Page (optional)	167.61
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS Mailing Address P O BOX 403846 City ATLANTA State GA Zip Code 30384 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00422 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 92.92
B. Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS Mailing Address P O BOX 403846 City ATLANTA State GA Zip Code 30384 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00423 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 95.23
C. Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS Mailing Address P O BOX 403846 City ATLANTA State GA Zip Code 30384 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00424 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 99.30

SUBTOTAL of Disbursements This Page (optional) ▶

287.45

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00425
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 102.75
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00426
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 109.93
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00427
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 116.91
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	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)	329.59
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00428
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 163.97
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00429
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 255.28
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00430
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 307.38
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	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)	726.63
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00431
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 323.27
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00432
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 354.11
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) IMPACT OFFICE PRODUCTS	Transaction ID: 2009M04L21A00433
	Mailing Address P O BOX 403846	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period 459.44
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	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)	▶	1136.82
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1598 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
IMPACT OFFICE PRODUCTS

Transaction ID: 2009M04L21A00434
Date of Disbursement

Mailing Address P O BOX 403846

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	0	9

City ATLANTA State GA Zip Code 30384

Amount of Each Disbursement this Period

1953.87

Purpose of Disbursement
OFFICE SUPPLIES

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
IRON MOUNTAIN

Transaction ID: 2009M04L21A00435
Date of Disbursement

Mailing Address P O BOX 27129

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	9

City NEW YORK State NY Zip Code 10087

Amount of Each Disbursement this Period

254.75

Purpose of Disbursement
OFF-SITE DATA PROTECTION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
ISLER, DARE, RAY & RADCLIFFE

Transaction ID: 2009M04L21A00436
Date of Disbursement

Mailing Address 1919 GALLOWS RD
SUITE 320

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	0	9

City VIENNA State VA Zip Code 22182

Amount of Each Disbursement this Period

5500.00

Purpose of Disbursement
LEGAL CONSULTING

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

7708.62

TOTAL This Period (last page this line number only) ▶

--

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1600 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 5620 UNIVERSITY PKWY City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement BAGGAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00438M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 15.00 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) HEATHER JEFFREYS Mailing Address 2721 S ADAMS ST APT 203 City ARLINGTON State VA Zip Code 22206 Purpose of Disbursement BAGGAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00439 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 15.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 5620 UNIVERSITY PKWY City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement BAGGAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00439M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 15.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	15.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RANCH 1, WASHINGTON DC	Transaction ID: 2009M04L21A00441M Date of Disbursement																			
	Mailing Address 1 AVIATION CIRCLE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	9													
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>5.76</td></tr></table>	5.76																		
5.76																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		[MEMO ITEM]																			

B.	Full Name (Last, First, Middle Initial) HEATHER JEFFREYS	Transaction ID: 2009M04L21A00442 Date of Disbursement																			
	Mailing Address 2721 S ADAMS ST APT 203	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	9													
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>9.01</td></tr></table>	9.01																		
9.01																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) PARADIES, WASHINGTON DC	Transaction ID: 2009M04L21A00442M Date of Disbursement																			
	Mailing Address 1 AVIATION CIRCLE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	9													
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>9.01</td></tr></table>	9.01																		
9.01																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		[MEMO ITEM]																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>9.01</td></tr></table>	9.01
9.01		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1603 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) HEATHER JEFFREYS</p> <p>Mailing Address 2721 S ADAMS ST APT 203</p> <p>City ARLINGTON State VA Zip Code 22206</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00443</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="45.70"/></p>
<p>B. Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00443M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="45.70"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) HEATHER JEFFREYS</p> <p>Mailing Address 2721 S ADAMS ST APT 203</p> <p>City ARLINGTON State VA Zip Code 22206</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00444</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="68.71"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="114.41"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1604 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00444M Date of Disbursement: 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">68.71</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) HEATHER JEFFREYS</p> <p>Mailing Address 2721 S ADAMS ST APT 203</p> <p>City ARLINGTON State VA Zip Code 22206</p> <p>Purpose of Disbursement TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00445 Date of Disbursement: 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">38.00</p>
<p>C. Full Name (Last, First, Middle Initial) HEATHER JEFFREYS</p> <p>Mailing Address 2721 S ADAMS ST APT 203</p> <p>City ARLINGTON State VA Zip Code 22206</p> <p>Purpose of Disbursement TIPS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00446 Date of Disbursement: 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">30.00</p>

SUBTOTAL of Disbursements This Page (optional)	68.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1605 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HEATHER JEFFREYS	Transaction ID: 2009M04L21A00447
	Mailing Address 2721 S ADAMS ST APT 203	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 75.00
	Purpose of Disbursement TIPS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOHNSON CONTROLS	Transaction ID: 2009M04L21A00448
	Mailing Address P O BOX 905240	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City CHARLOTTE State NC Zip Code 28290-5240	Amount of Each Disbursement this Period 5732.57
	Purpose of Disbursement EQUIPMENT MAINTENANCE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KIMBIA, INC.	Transaction ID: 2009M04L21A00449
	Mailing Address 1050 E. 11TH STREET SUITE 200	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City AUSTIN State TX Zip Code 78702	Amount of Each Disbursement this Period 2314.50
	Purpose of Disbursement BANKING SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8122.07
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1606 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) KLEIN, O'NEILL & SINGH, LLP	Transaction ID: 2009M04L21A00450
	Mailing Address 43 CORPORATE PARK SUITE 204	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City IRVINE State CA Zip Code 92606	Amount of Each Disbursement this Period 2573.25
	Purpose of Disbursement LEGAL CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JAN LARIMER	Transaction ID: 2009M04L21A00451
	Mailing Address P O BOX 610	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City TETON VILLAGE State WY Zip Code 83025	Amount of Each Disbursement this Period 134.75
	Purpose of Disbursement CAR RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ENTERPRISE RENT A CAR-MO	Transaction ID: 2009M04L21A00451M
	Mailing Address PO BOX 840181 CAGE 08EC1 DUNS;614830169	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City KANSAS CITY State MO Zip Code 64184-0181	Amount of Each Disbursement this Period 134.75
	Purpose of Disbursement CAR RENTAL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	2708.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
JAN LARIMER

Transaction ID: 2009M04L21A00452
Date of Disbursement

Mailing Address P O BOX 610

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	0	9

City TETON VILLAGE State WY Zip Code 83025

Amount of Each Disbursement this Period

Purpose of Disbursement
LODGING

Category/
Type

206.01

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
TREASURE ISLAND, LAS VEGAS NV

Transaction ID: 2009M04L21A00452M
Date of Disbursement

Mailing Address 3300 LAS VEGAS BLVD S

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	0	9

City LAS VEGAS State NV Zip Code 89109

Amount of Each Disbursement this Period

Purpose of Disbursement
LODGING

Category/
Type

206.01

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
JAN LARIMER

Transaction ID: 2009M04L21A00453
Date of Disbursement

Mailing Address P O BOX 610

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	9

City TETON VILLAGE State WY Zip Code 83025

Amount of Each Disbursement this Period

Purpose of Disbursement
PARKING

Category/
Type

25.00

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

231.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1608 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JAN LARIMER	Transaction ID: 2009M04L21A00454
	Mailing Address P O BOX 610	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City TETON VILLAGE State WY Zip Code 83025	Amount of Each Disbursement this Period 22.00
	Purpose of Disbursement TAXI Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JAN LARIMER	Transaction ID: 2009M04L21A00455
	Mailing Address P O BOX 610	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City TETON VILLAGE State WY Zip Code 83025	Amount of Each Disbursement this Period 30.25
	Purpose of Disbursement TAXI Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LE CIRQUE	Transaction ID: 2009M04L21A00456
	Mailing Address ONE BEACON COURT 151 EAST 58TH STREET	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City NEW YORK State NY Zip Code 10022	Amount of Each Disbursement this Period 1275.00
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1327.25
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1609 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LE CIRQUE	Transaction ID: 2009M04L21A00457 Date of Disbursement 03 / 26 / 2009
	Mailing Address ONE BEACON COURT 151 EAST 58TH STREET	Amount of Each Disbursement this Period 1275.00
	City NEW YORK State NY Zip Code 10022	
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LE CIRQUE	Transaction ID: 2009M04L21A00458 Date of Disbursement 03 / 26 / 2009
	Mailing Address ONE BEACON COURT 151 EAST 58TH STREET	Amount of Each Disbursement this Period 1275.00
	City NEW YORK State NY Zip Code 10022	
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00459 Date of Disbursement 03 / 06 / 2009
	Mailing Address 2440 N EDGEWOOD ST	Amount of Each Disbursement this Period 310.00
	City ARLINGTON State VA Zip Code 22207	
	Purpose of Disbursement AIR FARE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2860.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1610 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: 2009M04L21A00459M
	Mailing Address 5620 UNIVERSITY PKWY	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City WINSTON SALEM State NC Zip Code 27105	Amount of Each Disbursement this Period 310.00
	Purpose of Disbursement AIR FARE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00460
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 1193.36
	Purpose of Disbursement AIR FARE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) US AIRWAYS	Transaction ID: 2009M04L21A00460M
	Mailing Address 5620 UNIVERSITY PKWY	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City WINSTON SALEM State NC Zip Code 27105	Amount of Each Disbursement this Period 1193.36
	Purpose of Disbursement AIR FARE	[MEMO ITEM]
	Candidate Name	
	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) ► 1193.36

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement AIR FARE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00461 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1193.36
	Category/ Type
	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) US AIRWAYS <hr/> Mailing Address 5620 UNIVERSITY PKWY <hr/> City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement AIR FARE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00461M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1193.36
	Category/ Type
	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement AIR FARE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00462 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1193.36
	Category/ Type
	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	2386.72
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1612 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 5620 UNIVERSITY PKWY City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00462M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1193.36 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC Mailing Address 2440 N EDGEWOOD ST City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement BAGGAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00463 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 5620 UNIVERSITY PKWY City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement BAGGAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00463M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 84.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	84.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1613 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00464
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

373.61

Purpose of Disbursement
CAR RENTAL

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
THE HERTZ CORPORATION

Transaction ID: 2009M04L21A00464M
Date of Disbursement

Mailing Address COMMERCIAL BILLING DEPT 1124
PO BOX 121124

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City DALLAS State TX Zip Code 75312

Amount of Each Disbursement this Period

373.61

Purpose of Disbursement
CAR RENTAL

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00465
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

373.61

Purpose of Disbursement
CAR RENTAL

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

747.22

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)

PAGE 1614 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) THE HERTZ CORPORATION</p> <p>Mailing Address COMMERCIAL BILLING DEPT 1124 PO BOX 121124</p> <p>City DALLAS State TX Zip Code 75312</p> <p>Purpose of Disbursement CAR RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00465M Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 373.61</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC</p> <p>Mailing Address 2440 N EDGEWOOD ST</p> <p>City ARLINGTON State VA Zip Code 22207</p> <p>Purpose of Disbursement CAR RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00466 Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 373.63</p>
<p>C. Full Name (Last, First, Middle Initial) THE HERTZ CORPORATION</p> <p>Mailing Address COMMERCIAL BILLING DEPT 1124 PO BOX 121124</p> <p>City DALLAS State TX Zip Code 75312</p> <p>Purpose of Disbursement CAR RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00466M Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 373.63</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

373.63

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00467
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

Purpose of Disbursement
INTERNET SERVICES

Category/ Type

12.00

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
WEBLOYALTY.COM

Transaction ID: 2009M04L21A00467M
Date of Disbursement

Mailing Address 101 MERRITT 7
4TH FLOOR

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City NORWALK State CT Zip Code 06851

Amount of Each Disbursement this Period

Purpose of Disbursement
INTERNET SERVICES

Category/ Type

12.00

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00468
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

Purpose of Disbursement
MEALS

Category/ Type

14.89

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

26.89

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PARADIES, WEST PALM BEACH FL</p> <p>Mailing Address 1000 PALM BEACH AIRPORT SUITE 131</p> <p>City WEST PALM BEACH State FL Zip Code 33406</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00468M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">14.89</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9	14.89
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	6		2	0	0	9													
14.89																						
<p>B. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC</p> <p>Mailing Address 2440 N EDGEWOOD ST</p> <p>City ARLINGTON State VA Zip Code 22207</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00469</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">16.56</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9	16.56
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	6		2	0	0	9													
16.56																						
<p>C. Full Name (Last, First, Middle Initial) STARBUCKS, WASHINGTON DC</p> <p>Mailing Address 237 PENN AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00469M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">16.56</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	9	16.56
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	6		2	0	0	9													
16.56																						

SUBTOTAL of Disbursements This Page (optional) ▶

16.56

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CUCINA DELL'ARTE	Transaction ID: 2009M04L21A00471M
	Mailing Address 257 ROYAL POINCIANA WAY	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period 67.37
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00472
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 67.37
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) CUCINA DELL'ARTE	Transaction ID: 2009M04L21A00472M
	Mailing Address 257 ROYAL POINCIANA WAY	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period 67.37
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	67.37
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CARLYLE, ARLINGTON VA <hr/> Mailing Address 4000 SOUTH 28TH ST <hr/> City ARLINGTON State VA Zip Code 22206 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00474M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 70.32
			[MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00475 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 138.36
C.	Full Name (Last, First, Middle Initial) CARLYLE, ARLINGTON VA <hr/> Mailing Address 4000 SOUTH 28TH ST <hr/> City ARLINGTON State VA Zip Code 22206 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00475M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 138.36
			[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	138.36
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00476
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 155.40
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SONOMA, WASHINGTON DC	Transaction ID: 2009M04L21A00476M
	Mailing Address 223 PENNSYLVANIA AVE SE	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 155.40
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00477
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 187.63
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	343.03
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BANANA CAFE Mailing Address 500 8TH ST SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00477M Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	Amount of Each Disbursement this Period 187.63 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC Mailing Address 2440 N EDGEWOOD ST City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00478 Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	Amount of Each Disbursement this Period 201.81

C. Full Name (Last, First, Middle Initial) FOUR SEASONS HOTEL, WDC Mailing Address 2800 PENNSYLVANIA AVE NW City WASHINGTON State DC Zip Code 20007 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00478M Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	Amount of Each Disbursement this Period 201.81 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	201.81
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00479
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 201.82
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FOUR SEASONS HOTEL, WDC	Transaction ID: 2009M04L21A00479M
	Mailing Address 2800 PENNSYLVANIA AVE NW	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period 201.82
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00480
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 205.38
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	407.20
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CUCINA DELL'ARTE	Transaction ID: 2009M04L21A00480M
	Mailing Address 257 ROYAL POINCIANA WAY	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period 205.38
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00481
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 205.38
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) CUCINA DELL'ARTE	Transaction ID: 2009M04L21A00481M
	Mailing Address 257 ROYAL POINCIANA WAY	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period 205.38
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	205.38
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC Mailing Address 2440 N EDGEWOOD ST City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00482 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9 Amount of Each Disbursement this Period 205.39 Category/ Type
B.	Full Name (Last, First, Middle Initial) CUCINA DELL'ARTE Mailing Address 257 ROYAL POINCIANA WAY City PALM BEACH State FL Zip Code 33480 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00482M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9 Amount of Each Disbursement this Period 205.39 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC Mailing Address 2440 N EDGEWOOD ST City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00483 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9 Amount of Each Disbursement this Period 229.01 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	434.40
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00483M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="229.01"/></p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC</p> <p>Mailing Address 2440 N EDGEWOOD ST</p> <p>City ARLINGTON State VA Zip Code 22207</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00484</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="229.01"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00484M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="229.01"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="229.01"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

**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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC Mailing Address 2440 N EDGEWOOD ST City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00485 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 229.03
B.	Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH Mailing Address ONE SOUTH COUNTY ROAD City PALM BEACH State FL Zip Code 33480 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00485M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 229.03 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC Mailing Address 2440 N EDGEWOOD ST City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00486 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period 242.84

SUBTOTAL of Disbursements This Page (optional)	471.87
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TORTILLA COAST, WASHINGTON DC</p> <p>Mailing Address 400 FIRST ST SE</p> <p>City WASHINGTON State DC Zip Code 20016</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00486M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="242.84"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC</p> <p>Mailing Address 2440 N EDGEWOOD ST</p> <p>City ARLINGTON State VA Zip Code 22207</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00487</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="296.34"/></p>
<p>C. Full Name (Last, First, Middle Initial) FLAGLER'S STEAKHOUSE</p> <p>Mailing Address TWO SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00487M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="296.34"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="296.34"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00488 Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2009
	Amount of Each Disbursement this Period 296.34
	Category/ Type
	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) FLAGLER'S STEAKHOUSE <hr/> Mailing Address TWO SOUTH COUNTY ROAD <hr/> City PALM BEACH State FL Zip Code 33480 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00488M Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2009
	Amount of Each Disbursement this Period 296.34
	Category/ Type
	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00489 Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2009
	Amount of Each Disbursement this Period 296.34
	Category/ Type
	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

592.68

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLAGLER'S STEAKHOUSE	Transaction ID: 2009M04L21A00489M
	Mailing Address TWO SOUTH COUNTY ROAD	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period 296.34
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00490
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 296.34
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) FLAGLER'S STEAKHOUSE	Transaction ID: 2009M04L21A00490M
	Mailing Address TWO SOUTH COUNTY ROAD	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period 296.34
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	296.34
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00491
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

/ /

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

Purpose of Disbursement
MEALS

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
COSTCO, PALM BEACH FL

Transaction ID: 2009M04L21A00491M
Date of Disbursement

Mailing Address 3250 NORTHLAKE BLVD

/ /

City PALM BEACH GARDENS State FL Zip Code 33403

Amount of Each Disbursement this Period

Purpose of Disbursement
MEALS

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General
 Other (specify) ▼
State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00492
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

/ /

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

Purpose of Disbursement
MEALS

Category/
Type

Candidate Name

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) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) COSTCO, PALM BEACH FL <hr/> Mailing Address 3250 NORTHLAKE BLVD <hr/> City PALM BEACH GARDENS State FL Zip Code 33403 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00492M Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2009	Amount of Each Disbursement this Period 319.07 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00493 Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2009	Amount of Each Disbursement this Period 319.07 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) COSTCO, PALM BEACH FL <hr/> Mailing Address 3250 NORTHLAKE BLVD <hr/> City PALM BEACH GARDENS State FL Zip Code 33403 <hr/> Purpose of Disbursement MEALS Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00493M Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2009	Amount of Each Disbursement this Period 319.07 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	319.07
TOTAL This Period (last page this line number only) ▶	319.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1633 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00494
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 848.38
	Purpose of Disbursement MEALS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) THE 21 CLUB	Transaction ID: 2009M04L21A00494M
	Mailing Address 21 W 52ND ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City NEW YORK State NY Zip Code 10019	Amount of Each Disbursement this Period 848.38
	Purpose of Disbursement MEALS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00495
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 848.38
	Purpose of Disbursement MEALS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1696.76
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1634 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) THE 21 CLUB</p> <p>Mailing Address 21 W 52ND ST</p> <p>City NEW YORK State NY Zip Code 10019</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00495M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">848.38</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC</p> <p>Mailing Address 2440 N EDGEWOOD ST</p> <p>City ARLINGTON State VA Zip Code 22207</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00496</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">848.39</p>
<p>C. Full Name (Last, First, Middle Initial) THE 21 CLUB</p> <p>Mailing Address 21 W 52ND ST</p> <p>City NEW YORK State NY Zip Code 10019</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00496M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">848.39</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	848.39
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00497
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

/ /

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
CSTV NETWORKS

Transaction ID: 2009M04L21A00497M
Date of Disbursement

Mailing Address 2035 CORTE DEL NOGAL

/ /

City CARLSBAD State CA Zip Code 92011

Amount of Each Disbursement this Period

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00498
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

/ /

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

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)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DECORIUM</p> <p>Mailing Address 116 KING ST</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00498M</p> <p>Date of Disbursement MM / DD / YYYY 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 248.64</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC</p> <p>Mailing Address 2440 N EDGEWOOD ST</p> <p>City ARLINGTON State VA Zip Code 22207</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00499</p> <p>Date of Disbursement MM / DD / YYYY 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 515.50</p>
<p>C. Full Name (Last, First, Middle Initial) STEUBEN, CORNING NY</p> <p>Mailing Address 1 STEUBEN WAY</p> <p>City CORNING State NY Zip Code 14830</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00499M</p> <p>Date of Disbursement MM / DD / YYYY 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 515.50</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

515.50

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00500
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 515.50
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) STEUBEN, CORNING NY	Transaction ID: 2009M04L21A00500M
	Mailing Address 1 STEUBEN WAY	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City CORNING State NY Zip Code 14830	Amount of Each Disbursement this Period 515.50
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	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:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00501
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 515.50
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	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)	▶	1031.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) STEUBEN, CORNING NY	Transaction ID: 2009M04L21A00501M Date of Disbursement
	Mailing Address 1 STEUBEN WAY	<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City CORNING State NY Zip Code 14830	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="515.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00502 Date of Disbursement
	Mailing Address 2440 N EDGEWOOD ST	<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="515.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) STEUBEN, CORNING NY	Transaction ID: 2009M04L21A00502M Date of Disbursement
	Mailing Address 1 STEUBEN WAY	<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City CORNING State NY Zip Code 14830	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="515.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="515.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type <hr/> 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:	Transaction ID: 2009M04L21A00503 Date of Disbursement 03 / 06 / 2009 <hr/> Amount of Each Disbursement this Period 734.92
B.	Full Name (Last, First, Middle Initial) NATIONAL BOOK NETWORK <hr/> Mailing Address PO BOX 62188 <hr/> City BALTIMORE State MD Zip Code 21264 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type <hr/> 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:	Transaction ID: 2009M04L21A00503M Date of Disbursement 03 / 06 / 2009 <hr/> Amount of Each Disbursement this Period 734.92 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 <hr/> Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type <hr/> 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:	Transaction ID: 2009M04L21A00504 Date of Disbursement 03 / 06 / 2009 <hr/> Amount of Each Disbursement this Period 734.92

SUBTOTAL of Disbursements This Page (optional) ▶	1469.84
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NATIONAL BOOK NETWORK	Transaction ID: 2009M04L21A00504M Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	Mailing Address PO BOX 62188	Amount of Each Disbursement this Period 734.92
	City BALTIMORE State MD Zip Code 21264	
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00505 Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 2440 N EDGEWOOD ST	Amount of Each Disbursement this Period 734.92
	City ARLINGTON State VA Zip Code 22207	
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) NATIONAL BOOK NETWORK	Transaction ID: 2009M04L21A00505M Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	Mailing Address PO BOX 62188	Amount of Each Disbursement this Period 734.92
	City BALTIMORE State MD Zip Code 21264	
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	734.92
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00506
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 16.35
	Purpose of Disbursement TAXI	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00507
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 22.00
	Purpose of Disbursement TAXI	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00508
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 258.50
	Purpose of Disbursement TAXI	Category/ Type
	Candidate Name	
	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)	▶	296.85
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00509
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

109.46

Purpose of Disbursement
TELEPHONE CHARGES

--

Candidate Name

Category/ Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
AT & T MOBILITY

Transaction ID: 2009M04L21A00509M
Date of Disbursement

Mailing Address P O BOX 6463

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City CAROL STREAM State IL Zip Code 60197

Amount of Each Disbursement this Period

109.46

Purpose of Disbursement
TELEPHONE CHARGES

--

Candidate Name

Category/ Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
DEBBIE LEHARDY & CO, LLC

Transaction ID: 2009M04L21A00510
Date of Disbursement

Mailing Address 2440 N EDGEWOOD ST

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	9

City ARLINGTON State VA Zip Code 22207

Amount of Each Disbursement this Period

40.00

Purpose of Disbursement
TIPS

--

Candidate Name

Category/ Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

149.46

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)

PAGE 1643 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DEBBIE LEHARDY & CO, LLC	Transaction ID: 2009M04L21A00511
	Mailing Address 2440 N EDGEWOOD ST	Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	City ARLINGTON State VA Zip Code 22207	Amount of Each Disbursement this Period 1170.00
	Purpose of Disbursement TIPS	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LEXIS NEXIS	Transaction ID: 2009M04L21A00512
	Mailing Address PO BOX 7247-7090	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City PHILADELPHIA State PA Zip Code 19170	Amount of Each Disbursement this Period 213.77
	Purpose of Disbursement ONLINE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LEXIS NEXIS	Transaction ID: 2009M04L21A00513
	Mailing Address PO BOX 7247-7090	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City PHILADELPHIA State PA Zip Code 19170	Amount of Each Disbursement this Period 962.51
	Purpose of Disbursement ONLINE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	2346.28
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1644 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) LEXIS NEXIS	Transaction ID: 2009M04L21A00514
	Mailing Address PO BOX 7247-7090	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City PHILADELPHIA State PA Zip Code 19170	Amount of Each Disbursement this Period 2262.46
	Purpose of Disbursement ONLINE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) THE LUKENS COMPANY	Transaction ID: 2009M04L21A00515
	Mailing Address 2800 SHIRLINGTON ROAD 9TH FLOOR	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 15440.28
	Purpose of Disbursement MAIL PRODUCTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) GEORGE F LYNCH JR, P.C.	Transaction ID: 2009M04L21A00516
	Mailing Address CERTIFIED PUBLIC ACCOUNTANT 700 PRINCESS STREET,STE 200	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement ACCOUNTING SERVICE	Category/ Type
	Candidate Name	
	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)	▶	20702.74
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMBER LYONS</p> <p>Mailing Address 520 JOHN CARLYLE ST APT 326</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement CATERING COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00517</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">799.88</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	9	/	2	0	0	9	799.88
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	9	/	2	0	0	9													
799.88																						
<p>B. Full Name (Last, First, Middle Initial) WINDOWS CATERING</p> <p>Mailing Address 5724 GENERAL WASHINGTON DRIVE</p> <p>City ALEXANDRIA State VA Zip Code 22312</p> <p>Purpose of Disbursement CATERING COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00517M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">799.88</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	9	/	2	0	0	9	799.88
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	9	/	2	0	0	9													
799.88																						
<p>C. Full Name (Last, First, Middle Initial) AMBER LYONS</p> <p>Mailing Address 520 JOHN CARLYLE ST APT 326</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00518</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">46.15</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	9	/	2	0	0	9	46.15
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	9	/	2	0	0	9													
46.15																						

SUBTOTAL of Disbursements This Page (optional)	846.03
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1646 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) THE CHEESECAKE FACTORY, VA</p> <p>Mailing Address 2900 WILSON RD</p> <p>City ARLINGTON State VA Zip Code 22201</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00518M</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="46.15"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) MADISON MANAGEMENT GROUP</p> <p>Mailing Address 3101 HEMLOCK HILLS LANE</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement CONSULTING-STAFF ASSISTANT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00519</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="13500.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) TORY MAGUIRE</p> <p>Mailing Address 620 9TH ST SW</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement EQUIPMENT REIMBURSEMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00520</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="230.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="13730.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1647 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) RNC</p> <p>Mailing Address 310 1ST ST SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement EQUIPMENT REIMBURSEMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00520M Date of Disbursement: 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">230.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) TORY MAGUIRE</p> <p>Mailing Address 620 9TH ST SW</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement ISSUED IN ERROR 3/26/2009</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00521 Date of Disbursement: 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">-230.00</p>
<p>C. Full Name (Last, First, Middle Initial) MAIL AMERICA COMMUNICATIONS,</p> <p>Mailing Address INC. PO BOX 643184</p> <p>City CINCINNATI State OH Zip Code 45264</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00522 Date of Disbursement: 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">318086.32</p>

SUBTOTAL of Disbursements This Page (optional) ▶

317856.32

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MAIL AMERICA COMMUNICATIONS,</p> <p>Mailing Address INC. PO BOX 643184</p> <p>City CINCINNATI State OH Zip Code 45264</p> <p>Purpose of Disbursement PRINT,MAIL PRODUCTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00523</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">167636.17</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	167636.17
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
167636.17																						
<p>B. Full Name (Last, First, Middle Initial) COURTYARD MARRIOTT LINCROFT</p> <p>Mailing Address 245 HALF MILE RD</p> <p>City RED BANK State NJ Zip Code 07701</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00524</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">4811.65</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0	9	4811.65
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	0	9													
4811.65																						
<p>C. Full Name (Last, First, Middle Initial) MARSH COPSEY & ASSOCIATES,INC.</p> <p>Mailing Address 1334 PENNSYLVANIA AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement STAFF CONSULTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00525</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">7000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	7000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
7000.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

179447.82

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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARSH COPSEY & ASSOCIATES, INC.

Mailing Address 1334 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
STAFF CONSULTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00526
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
MCCAIN PALIN 2008

Mailing Address P O BOX 16118

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00527
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
MCDERMOTT WILL & EMERY

Mailing Address P O BOX 7247-6751

City PHILADELPHIA State PA Zip Code 19170-6751

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00528
Date of Disbursement

/ /

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ANN MCENIRY	Transaction ID: 2009M04L21A00529 Date of Disbursement
	Mailing Address 1111 N RANDOLPH ST APT 4	<input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement PARKING	<input type="text" value="30.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ANN MCENIRY	Transaction ID: 2009M04L21A00530 Date of Disbursement
	Mailing Address 1111 N RANDOLPH ST APT 4	<input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement PARKING	<input type="text" value="30.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ANN MCENIRY	Transaction ID: 2009M04L21A00531 Date of Disbursement
	Mailing Address 1111 N RANDOLPH ST APT 4	<input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement TAXI	<input type="text" value="9.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="69.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ANN MCENIRY	Transaction ID: 2009M04L21A00532 Date of Disbursement
	Mailing Address 1111 N RANDOLPH ST APT 4	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement TAXI	<input type="text" value="15.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ANN MCENIRY	Transaction ID: 2009M04L21A00533 Date of Disbursement
	Mailing Address 1111 N RANDOLPH ST APT 4	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement TAXI	<input type="text" value="19.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ANN MCENIRY	Transaction ID: 2009M04L21A00534 Date of Disbursement
	Mailing Address 1111 N RANDOLPH ST APT 4	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEPHONE CHARGES	<input type="text" value="56.73"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="90.73"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1652 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00534M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">56.73</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	56.73
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
56.73																						
<p>B. Full Name (Last, First, Middle Initial) MCLAUGHLIN & ASSOCIATES</p> <p>Mailing Address 566 SOUTH ROUTE 303</p> <p>City BLAUVELT State NY Zip Code 10913</p> <p>Purpose of Disbursement SURVEY COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00535</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">4750.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9	4750.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	0	9													
4750.00																						
<p>C. Full Name (Last, First, Middle Initial) MDI IMAGING AND MAIL</p> <p>Mailing Address 21955 CASCADES PARKWAY</p> <p>City DULLES State VA Zip Code 20166</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00536</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">20568.12</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0	9	20568.12
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	7		2	0	0	9													
20568.12																						

SUBTOTAL of Disbursements This Page (optional) ▶

25318.12

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00537
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 24.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00538
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 59.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00539
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 66.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	149.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00540
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 114.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00541
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 114.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00542
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 132.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	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)	▶	360.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00543
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 232.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00544
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 420.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00545
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 1643.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

2295.00

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00546
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 1661.55
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00547
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 2228.65
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00548
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 3442.50
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7332.70
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00549
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 3996.20
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00550
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 4381.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00551
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 6744.25
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15121.45
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION</p> <p>Mailing Address PO BOX 16006</p> <p>City PHOENIX State AZ Zip Code 85011</p> <p>Purpose of Disbursement TELEMARKETING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00552</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 7261.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION</p> <p>Mailing Address PO BOX 16006</p> <p>City PHOENIX State AZ Zip Code 85011</p> <p>Purpose of Disbursement TELEMARKETING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00553</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 7624.05</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION</p> <p>Mailing Address PO BOX 16006</p> <p>City PHOENIX State AZ Zip Code 85011</p> <p>Purpose of Disbursement TELEMARKETING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00554</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 8008.30</p>

SUBTOTAL of Disbursements This Page (optional) ▶

22893.35

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00555
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 9065.65
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00556
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 9572.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00557
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 9884.50
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	28522.15
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00558
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 10207.80
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00559
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 10237.50
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION	Transaction ID: 2009M04L21A00560
	Mailing Address PO BOX 16006	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City PHOENIX State AZ Zip Code 85011	Amount of Each Disbursement this Period 12362.00
	Purpose of Disbursement TELEMARKETING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	32807.30
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION <hr/> Mailing Address PO BOX 16006 <hr/> City PHOENIX State AZ Zip Code 85011 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00561 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 15714.50
B. Full Name (Last, First, Middle Initial) MDS COMMUNICATIONS CORPORATION <hr/> Mailing Address PO BOX 16006 <hr/> City PHOENIX State AZ Zip Code 85011 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00562 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 18470.50
C. Full Name (Last, First, Middle Initial) MELISSA DATA CORPORATION <hr/> Mailing Address 22382 AVENIDA EMPRESA <hr/> City RANCHO SANTA MARGA State CA Zip Code 92688 <hr/> Purpose of Disbursement SOFTWARE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00563 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1708.00

SUBTOTAL of Disbursements This Page (optional) ▶

35893.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MICRO AGE	Transaction ID: 2009M04L21A00564 Date of Disbursement																			
	Mailing Address PO BOX 2941	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City PHOENIX State AZ Zip Code 85062	Amount of Each Disbursement this Period																			
	Purpose of Disbursement COMPUTER EQUIPMENT	<table border="1"><tr><td>288.27</td></tr></table>	288.27																		
288.27																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) MICRO AGE	Transaction ID: 2009M04L21A00565 Date of Disbursement																			
	Mailing Address PO BOX 2941	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City PHOENIX State AZ Zip Code 85062	Amount of Each Disbursement this Period																			
	Purpose of Disbursement COMPUTER EQUIPMENT	<table border="1"><tr><td>950.57</td></tr></table>	950.57																		
950.57																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) MICRO AGE	Transaction ID: 2009M04L21A00566 Date of Disbursement																			
	Mailing Address PO BOX 2941	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City PHOENIX State AZ Zip Code 85062	Amount of Each Disbursement this Period																			
	Purpose of Disbursement OFFICE SUPPLIES	<table border="1"><tr><td>376.36</td></tr></table>	376.36																		
376.36																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1615.20</td></tr></table>	1615.20
1615.20		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NATIONAL CAR RENTAL	Transaction ID: 2009M04L21A00570 Date of Disbursement																			
	Mailing Address P O BOX 402334	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CAR RENTAL	<table border="1"><tr><td>169.10</td></tr></table>	169.10																		
169.10																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) NATIONAL CAR RENTAL	Transaction ID: 2009M04L21A00571 Date of Disbursement																			
	Mailing Address P O BOX 402334	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City ATLANTA State GA Zip Code 30384	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CAR RENTAL	<table border="1"><tr><td>763.29</td></tr></table>	763.29																		
763.29																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) NATIONAL NEWS AGENCY, INC	Transaction ID: 2009M04L21A00572 Date of Disbursement																			
	Mailing Address 4331 BLADENSBURG RD	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City COLMAR MANOR State MD Zip Code 20722	Amount of Each Disbursement this Period																			
	Purpose of Disbursement SUBSCRIPTION	<table border="1"><tr><td>493.35</td></tr></table>	493.35																		
493.35																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1425.74</td></tr></table>	1425.74
1425.74		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NATIONAL CAPITAL TELESERVICES	Transaction ID: 2009M04L21A00573
	Mailing Address: LLC 300 FIFTH STREET, NE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City: WASHINGTON State: DC Zip Code: 20002	Amount of Each Disbursement this Period 4365.00
	Purpose of Disbursement: TELEMARKETING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NATIONAL CAPITAL TELESERVICES	Transaction ID: 2009M04L21A00574
	Mailing Address: LLC 300 FIFTH STREET, NE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City: WASHINGTON State: DC Zip Code: 20002	Amount of Each Disbursement this Period 5070.00
	Purpose of Disbursement: TELEMARKETING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NATIONAL CAPITAL TELESERVICES	Transaction ID: 2009M04L21A00575
	Mailing Address: LLC 300 FIFTH STREET, NE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City: WASHINGTON State: DC Zip Code: 20002	Amount of Each Disbursement this Period 10250.00
	Purpose of Disbursement: TELEMARKETING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	19685.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ON MESSAGE, INC.	Transaction ID: 2009M04L21A00582 Date of Disbursement
	Mailing Address 2130 PRIEST BRIDGE DR #11	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City CRFTON State MD Zip Code 21114	Amount of Each Disbursement this Period
	Purpose of Disbursement SPEECH WRITING	<input type="text" value="12000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ON MESSAGE, INC.	Transaction ID: 2009M04L21A00583 Date of Disbursement
	Mailing Address 2130 PRIEST BRIDGE DR #11	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City CRFTON State MD Zip Code 21114	Amount of Each Disbursement this Period
	Purpose of Disbursement SURVEY COST	<input type="text" value="29000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) OVAL OFFICE WRITERS,LLC	Transaction ID: 2009M04L21A00584 Date of Disbursement
	Mailing Address 431 SOUTH FAIRFAX STREET	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement AIR FARE	<input type="text" value="919.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="41919.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 5620 UNIVERSITY PKWY City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00584M Date of Disbursement 03 / 05 / 2009	Amount of Each Disbursement this Period 919.20 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) OVAL OFFICE WRITERS,LLC Mailing Address 431 SOUTH FAIRFAX STREET City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement SPEECH WRITING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00585 Date of Disbursement 03 / 05 / 2009	Amount of Each Disbursement this Period 16900.00
C.	Full Name (Last, First, Middle Initial) PAO'S CUSTOM DECKS AND Mailing Address CONST. LLC 1859 GATES DRIVE WEST City PLATTE CITY State MO Zip Code 64079 Purpose of Disbursement LABOR COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00586 Date of Disbursement 03 / 26 / 2009	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶

17400.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PAY PAL INC.	Transaction ID: 2009M04L21A00587 Date of Disbursement
	Mailing Address 4100 SOLUTIONS CENTER, #774100	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City CHICAGO State IL Zip Code 60677	Amount of Each Disbursement this Period
	Purpose of Disbursement BANKING SERVICES	<input type="text" value="273.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PC GROUP	Transaction ID: 2009M04L21A00588 Date of Disbursement
	Mailing Address P O BOX 398	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City MCLEAN State VA Zip Code 22101	Amount of Each Disbursement this Period
	Purpose of Disbursement INTERNET SERVICES	<input type="text" value="334.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NETWORK SOLUTIONS	Transaction ID: 2009M04L21A00588M Date of Disbursement
	Mailing Address 13861 SUNRISE VALLEY DRIVE	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City HERNDON State VA Zip Code 20171	Amount of Each Disbursement this Period
	Purpose of Disbursement INTERNET SERVICES	<input type="text" value="334.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="608.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PC GROUP	Transaction ID: 2009M04L21A00589 Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	Mailing Address P O BOX 398	Amount of Each Disbursement this Period 400.00
	City MCLEAN State VA Zip Code 22101	
	Purpose of Disbursement SOFTWARE MAINTENANCE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PEPCO	Transaction ID: 2009M04L21A00590 Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	Mailing Address P O BOX 4863	Amount of Each Disbursement this Period 22171.31
	City TRENTON State NJ Zip Code 08650-4863	
	Purpose of Disbursement UTILITIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DAN PERKINS	Transaction ID: 2009M04L21A00591 Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	Mailing Address 403 ROLAND ST SW	Amount of Each Disbursement this Period 37.95
	City VIENNA State VA Zip Code 22180	
	Purpose of Disbursement INTERNET SERVICES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	22609.26
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: 2009M04L21A00591M
	Mailing Address P O BOX 660720	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City DALLAS State TX Zip Code 75266-0720	Amount of Each Disbursement this Period 37.95
	Purpose of Disbursement INTERNET SERVICES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) DAN PERKINS	Transaction ID: 2009M04L21A00592
	Mailing Address 403 ROLAND ST SW	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City VIENNA State VA Zip Code 22180	Amount of Each Disbursement this Period 62.10
	Purpose of Disbursement TELEPHONE CHARGES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: 2009M04L21A00592M
	Mailing Address P O BOX 660720	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City DALLAS State TX Zip Code 75266-0720	Amount of Each Disbursement this Period 62.10
	Purpose of Disbursement TELEPHONE CHARGES	[MEMO ITEM]
	Candidate Name	
	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)	▶	62.10
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TREVOR PERSON</p> <p>Mailing Address 42 ALSACE COURT</p> <p>City LITTLE ROCK State AR Zip Code 72223</p> <p>Purpose of Disbursement FUEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00593</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 7.10</p>
<p>B. Full Name (Last, First, Middle Initial) TREVOR PERSON</p> <p>Mailing Address 42 ALSACE COURT</p> <p>City LITTLE ROCK State AR Zip Code 72223</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00594</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 138.60</p>
<p>C. Full Name (Last, First, Middle Initial) HAMPTON, ALEXANDRIA VA</p> <p>Mailing Address 1616 KING ST</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00594M</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 138.60</p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>145.70</p>
<p>TOTAL This Period (last page this line number only)</p>	

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) FABER NEWS, WASHINGTON DC</p> <p>Mailing Address 1 AVIATION</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00596M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">4.49</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	4.49
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
4.49																						
<p>B. Full Name (Last, First, Middle Initial) TREVOR PERSON</p> <p>Mailing Address 42 ALSACE COURT</p> <p>City LITTLE ROCK State AR Zip Code 72223</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00597</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">20.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	20.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
20.00																						
<p>C. Full Name (Last, First, Middle Initial) TREVOR PERSON</p> <p>Mailing Address 42 ALSACE COURT</p> <p>City LITTLE ROCK State AR Zip Code 72223</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00598</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">92.95</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	92.95
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
92.95																						

SUBTOTAL of Disbursements This Page (optional) ▶

112.95

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) AT & T MOBILITY Mailing Address P O BOX 6463 City CAROL STREAM State IL Zip Code 60197 Purpose of Disbursement TELEPHONE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00598M Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	Amount of Each Disbursement this Period 92.95 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) SARAH PETRE Mailing Address 4328 GARRISON ST NW City WASHINGTON State DC Zip Code 20016 Purpose of Disbursement PARKING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00599 Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	Amount of Each Disbursement this Period 30.00

C. Full Name (Last, First, Middle Initial) SARAH PETRE Mailing Address 4328 GARRISON ST NW City WASHINGTON State DC Zip Code 20016 Purpose of Disbursement TELEPHONE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00600 Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	Amount of Each Disbursement this Period 54.51

SUBTOTAL of Disbursements This Page (optional) ▶	84.51
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1677 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SPRINT</p> <p>Mailing Address P O BOX 105243</p> <p>City ATLANTA State GA Zip Code 30348-5243</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00600M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 54.51</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) PITNEY BOWES GLOBAL FINANCIAL</p> <p>Mailing Address SERVICES LLC P O BOX 856460</p> <p>City LOUISVILLE State KY Zip Code 40285</p> <p>Purpose of Disbursement EQUIPMENT RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00601 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 437.81</p>
<p>C. Full Name (Last, First, Middle Initial) PREFERRED COMMUNICATIONS</p> <p>Mailing Address 815 KING STREET SUITE 209</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement LIST RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00602 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1437.81

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1678 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PRESS ASSOCIATION,INC</p> <p>Mailing Address PO BOX 414243</p> <p>City BOSTON State MA Zip Code 02241</p> <p>Purpose of Disbursement SUBSCRIPTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00603 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 2100.00</p>
<p>B. Full Name (Last, First, Middle Initial) REINCE PRIEBUS</p> <p>Mailing Address 2340 2ND STREET</p> <p>City KENOSHA State WI Zip Code 53140</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00604 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 667.20</p>
<p>C. Full Name (Last, First, Middle Initial) UNITED AIRLINES</p> <p>Mailing Address PO BOX 2013</p> <p>City CHICAGO State IL Zip Code 60673</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00604M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 667.20</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2767.20

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)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
REINCE PRIEBUS

Mailing Address 2340 2ND STREET

City KENOSHA State WI Zip Code 53140

Purpose of Disbursement
AIR FARE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00605
Date of Disbursement

MM / DD / YYYY
03 / 05 / 2009

Amount of Each Disbursement this Period

1348.38

B.

Full Name (Last, First, Middle Initial)
ORBITZ

Mailing Address 1 HARBORSIDE DRIVE

City EAST BOSTON State MA Zip Code 02128

Purpose of Disbursement
AIR FARE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00605M
Date of Disbursement

MM / DD / YYYY
03 / 05 / 2009

Amount of Each Disbursement this Period

1348.38

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
REINCE PRIEBUS

Mailing Address 2340 2ND STREET

City KENOSHA State WI Zip Code 53140

Purpose of Disbursement
LODGING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00606
Date of Disbursement

MM / DD / YYYY
03 / 05 / 2009

Amount of Each Disbursement this Period

308.01

SUBTOTAL of Disbursements This Page (optional)

1656.39

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CAPITAL HILTON</p> <p>Mailing Address 1001 16TH ST</p> <p>City WASHINGTON State DC Zip Code 20036</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00606M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 308.01</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) REINCE PRIEBUS</p> <p>Mailing Address 2340 2ND STREET</p> <p>City KENOSHA State WI Zip Code 53140</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00607 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 527.56</p>
<p>C. Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES</p> <p>Mailing Address 200 C. STREET SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00607M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 527.56</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

527.56

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1681 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) REINCE PRIEBUS Mailing Address 2340 2ND STREET City KENOSHA State WI Zip Code 53140 Purpose of Disbursement PARKING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00608 Date of Disbursement 03 / 05 / 2009 Amount of Each Disbursement this Period 145.00
B.	Full Name (Last, First, Middle Initial) REINCE PRIEBUS Mailing Address 2340 2ND STREET City KENOSHA State WI Zip Code 53140 Purpose of Disbursement TAXI'S Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00609 Date of Disbursement 03 / 05 / 2009 Amount of Each Disbursement this Period 128.00
C.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE Mailing Address 7975 BRANCH AVE City CLINTON State MD Zip Code 20735 Purpose of Disbursement STORAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00610 Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 32.00

SUBTOTAL of Disbursements This Page (optional) ▶

305.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: 2009M04L21A00611 Date of Disbursement																			
	Mailing Address 7975 BRANCH AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period																			
	Purpose of Disbursement STORAGE COST	<table border="1"><tr><td>195.50</td></tr></table>	195.50																		
195.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: 2009M04L21A00612 Date of Disbursement																			
	Mailing Address 7975 BRANCH AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period																			
	Purpose of Disbursement STORAGE COST	<table border="1"><tr><td>218.50</td></tr></table>	218.50																		
218.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: 2009M04L21A00613 Date of Disbursement																			
	Mailing Address 7975 BRANCH AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period																			
	Purpose of Disbursement STORAGE COST	<table border="1"><tr><td>218.50</td></tr></table>	218.50																		
218.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>632.50</td></tr></table>	632.50
632.50		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: 2009M04L21A00614
	Mailing Address 7975 BRANCH AVE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period 218.50
	Purpose of Disbursement STORAGE COST	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: 2009M04L21A00615
	Mailing Address 7975 BRANCH AVE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period 218.50
	Purpose of Disbursement STORAGE COST	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: 2009M04L21A00616
	Mailing Address 7975 BRANCH AVE	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period 226.50
	Purpose of Disbursement STORAGE COST	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	663.50
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: 2009M04L21A00617 Date of Disbursement																			
	Mailing Address 7975 BRANCH AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period																			
	Purpose of Disbursement STORAGE COST	<table border="1"><tr><td>226.50</td></tr></table>	226.50																		
226.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: 2009M04L21A00618 Date of Disbursement																			
	Mailing Address 7975 BRANCH AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period																			
	Purpose of Disbursement STORAGE COST	<table border="1"><tr><td>226.50</td></tr></table>	226.50																		
226.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) PUBLIC STORAGE	Transaction ID: 2009M04L21A00619 Date of Disbursement																			
	Mailing Address 7975 BRANCH AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period																			
	Purpose of Disbursement STORAGE COST	<table border="1"><tr><td>226.50</td></tr></table>	226.50																		
226.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>679.50</td></tr></table>	679.50
679.50		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1685 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) PUBLIC STORAGE Mailing Address 7975 BRANCH AVE City CLINTON State MD Zip Code 20735 Purpose of Disbursement STORAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00620 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 238.00 Category/Type

B. Full Name (Last, First, Middle Initial) RANDY PULLEN Mailing Address 4915 E LAYAYETTE City PHOENIX State AZ Zip Code 85018 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00621 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 937.40 Category/Type

C. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 5620 UNIVERSITY PKWY City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement AIR FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00621M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 937.40 Category/Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	1175.40
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) RANDY PULLEN</p> <p>Mailing Address 4915 E LAYAYETTE</p> <p>City PHOENIX State AZ Zip Code 85018</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00622 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 717.93</p>
<p>B. Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES</p> <p>Mailing Address 200 C. STREET SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00622M Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 717.93</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) RANDY PULLEN</p> <p>Mailing Address 4915 E LAYAYETTE</p> <p>City PHOENIX State AZ Zip Code 85018</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00623 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 13.62</p>

SUBTOTAL of Disbursements This Page (optional) ▶

731.55

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1687 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BULLFEATHERS, WASHINGTON DC	Transaction ID: 2009M04L21A00623M
	Mailing Address 410 1ST ST SE	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 13.62
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) RANDY PULLEN	Transaction ID: 2009M04L21A00624
	Mailing Address 4915 E LAYAYETTE	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City PHOENIX State AZ Zip Code 85018	Amount of Each Disbursement this Period 30.50
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB	Transaction ID: 2009M04L21A00624M
	Mailing Address 300 FIRST STREET, SE	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period 30.50
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	30.50
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) RANDY PULLEN</p> <p>Mailing Address 4915 E LAYAYETTE</p> <p>City PHOENIX State AZ Zip Code 85018</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00625</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 152.90</p>
<p>B. Full Name (Last, First, Middle Initial) SONOMA, WASHINGTON DC</p> <p>Mailing Address 223 PENNSYLVANIA AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00625M</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 152.90</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) RANDY PULLEN</p> <p>Mailing Address 4915 E LAYAYETTE</p> <p>City PHOENIX State AZ Zip Code 85018</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00626</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 38.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

190.90

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) PVI OFFICE FURNITURE Mailing Address 2421 MONOCACY BLVD City FREDERICK State MD Zip Code 21701 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00627 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 2684.53

B. Full Name (Last, First, Middle Initial) SHANNON REEVES Mailing Address 605 CLARIDAN RANCH RD City SOUTHLAKE State TX Zip Code 76092 Purpose of Disbursement FUEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00628 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 6.52

C. Full Name (Last, First, Middle Initial) SHANNON REEVES Mailing Address 605 CLARIDAN RANCH RD City SOUTHLAKE State TX Zip Code 76092 Purpose of Disbursement FUEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00629 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 8.59

SUBTOTAL of Disbursements This Page (optional) ▶	2699.64
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement FUEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00630</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="29.41"/></p>
<p>B. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement FUEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00631</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="48.70"/></p>
<p>C. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00632</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="154.63"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

232.74

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) COURTYARD MARRIOTT AUSTIN Mailing Address 4533 SOUTH- LANE 35 City AUSTIN State TX Zip Code 78744 Purpose of Disbursement LODGING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00632M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 154.63 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) SHANNON REEVES Mailing Address 605 CLARIDAN RANCH RD City SOUTHLAKE State TX Zip Code 76092 Purpose of Disbursement LODGING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00633 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 155.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) HILTON, ATLANTA GA Mailing Address 1031 VIRGINIA AVENUE City ATLANTA State GA Zip Code 30354 Purpose of Disbursement LODGING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00633M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 155.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	155.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00634 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 183.83</p>
<p>B. Full Name (Last, First, Middle Initial) THE LAQTHAM HOTEL, WDC</p> <p>Mailing Address 3000 M ST NW</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00634M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 183.83</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00635 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 266.90</p>

SUBTOTAL of Disbursements This Page (optional)	450.73
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
HAMPTON, WASHINGTON DC

Mailing Address 901 6TH ST NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
LODGING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00635M
Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

266.90

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
SHANNON REEVES

Mailing Address 605 CLARIDAN RANCH RD

City SOUTHLAKE State TX Zip Code 76092

Purpose of Disbursement
LODGING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00636
Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

299.50

C.

Full Name (Last, First, Middle Initial)
HILTON, SHREVEPORT

Mailing Address 104 MARKET STREET

City SHREVEPORT State LA Zip Code 71101

Purpose of Disbursement
LODGING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00636M
Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

299.50

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

299.50

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00637 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="303.37"/></p>
<p>B. Full Name (Last, First, Middle Initial) HILTON, LOS ANGELES CA</p> <p>Mailing Address 5711 WEST CENTURY BLVD</p> <p>City LOS ANGELES State CA Zip Code 90045</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00637M Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="303.37"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00638 Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="369.56"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) FIVE GUYS, DULLES VA Mailing Address 44844 AUTO PILOT DR City DULLES State VA Zip Code 20166 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00641M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 9.84 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) SHANNON REEVES Mailing Address 605 CLARIDAN RANCH RD City SOUTHLAKE State TX Zip Code 76092 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00642 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 17.60 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) JOHNNY ROCKETS, WASHINGTON DC Mailing Address 3131 H ST City WASHINGTON State DC Zip Code 20007 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00642M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 17.60 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	17.60
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00643</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">18.02</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0	9	18.02
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	0	9													
18.02																						
<p>B. Full Name (Last, First, Middle Initial) TORTILLA COAST, WASHINGTON DC</p> <p>Mailing Address 400 FIRST ST SE</p> <p>City WASHINGTON State DC Zip Code 20016</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00643M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">18.02</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0	9	18.02
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	9		2	0	0	9													
18.02																						
<p>C. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00644</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">19.30</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	19.30
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
19.30																						

SUBTOTAL of Disbursements This Page (optional)	37.32
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)

PAGE 1699 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BURGER KING FAIRFIELD, CA	Transaction ID: 2009M04L21A00644M
	Mailing Address 190 PITTMAN RD	Date of Disbursement 03 / 05 / 2009
	City FAIRFIELD State CA Zip Code 94533	Amount of Each Disbursement this Period 19.30
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SHANNON REEVES	Transaction ID: 2009M04L21A00645
	Mailing Address 605 CLARIDAN RANCH RD	Date of Disbursement 03 / 05 / 2009
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period 19.77
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) THE ORIGINAL MEL'S	Transaction ID: 2009M04L21A00645M
	Mailing Address 2057 ARENA BLVD	Date of Disbursement 03 / 05 / 2009
	City SACRAMENTO State CA Zip Code 95834	Amount of Each Disbursement this Period 19.77
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	19.77
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1700 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SHANNON REEVES Mailing Address 605 CLARIDAN RANCH RD City SOUTHLAKE State TX Zip Code 76092 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00646 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">24.90</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	24.90
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	5		2	0	0	9														
24.90																							
B.	Full Name (Last, First, Middle Initial) P.F. CHANG'S CHINA BISTRO Mailing Address 5633 BAY STREET City EMERYVILLE State CA Zip Code 94608 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00646M Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">24.90</td> </tr> </table> [MEMO ITEM]	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	24.90
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	5		2	0	0	9														
24.90																							
C.	Full Name (Last, First, Middle Initial) SHANNON REEVES Mailing Address 605 CLARIDAN RANCH RD City SOUTHLAKE State TX Zip Code 76092 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00647 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: center;">31.32</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9	31.32
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	6		2	0	0	9														
31.32																							

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="text-align: center;">56.22</td> </tr> </table>	56.22
56.22		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="height: 20px;"></td> </tr> </table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1701 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PEPPERMILL RESTAURANT, CA</p> <p>Mailing Address 3524 SEVERN AVE</p> <p>City METAIRIE State LA Zip Code 70002</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00647M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="31.32"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00648</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="33.53"/></p>
<p>C. Full Name (Last, First, Middle Initial) HOLIDAY FISH SOUL FOOD</p> <p>Mailing Address 8217 INTERNATIONAL BLVD</p> <p>City OAKLAND State CA Zip Code 94621</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00648M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="33.53"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="33.53"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1702 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00649 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 41.95</p>
<p>B. Full Name (Last, First, Middle Initial) HORSESHOE CASINO & HOTEL, LA</p> <p>Mailing Address 711 HORSESHOE BLVD P O BOX 7111</p> <p>City BOSSIER CITY State LA Zip Code 71171</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00649M Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 41.95</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00650 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 54.34</p>

SUBTOTAL of Disbursements This Page (optional) ▶

96.29

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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) BROTHER'S SEAFOOD, SHREVEPORT Mailing Address 4916 MONKHOUSE City SHREVEPORT State LA Zip Code 71101 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00650M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 54.34 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) SHANNON REEVES Mailing Address 605 CLARIDAN RANCH RD City SOUTHLAKE State TX Zip Code 76092 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00651 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 62.53 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) NEW ORLEANS HAMBURGER & SEAFOO Mailing Address 1338 W. AIRLINE HWY City LAPLACE State LA Zip Code 70068 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00651M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 62.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	62.53
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1704 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00652</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">85.83</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	9		85.83
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	9														
85.83																						
<p>B. Full Name (Last, First, Middle Initial) LEGAL SEA FOODS</p> <p>Mailing Address 704-708 7TH STREET NW</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00652M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">85.83</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	9		85.83
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	9														
85.83																						
<p>C. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00653</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">92.20</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	9		92.20
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	9														
92.20																						

SUBTOTAL of Disbursements This Page (optional)	178.03
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1705 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CHEESECAKE BISTRO, NEW ORLEANS

Mailing Address 2001 ST CHARLES AVE

City State Zip Code
NEW ORLEANS LA 70130

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00653M

Date of Disbursement

/ /

Amount of Each Disbursement this Period

92.20

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
SHANNON REEVES

Mailing Address 605 CLARIDAN RANCH RD

City State Zip Code
SOUTHLAKE TX 76092

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00654

Date of Disbursement

/ /

Amount of Each Disbursement this Period

98.32

C.

Full Name (Last, First, Middle Initial)
CLYDE'S-WASHINGTON DC

Mailing Address 707 7TH STREET NW

City State Zip Code
WASHINGTON DC 20001

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00654M

Date of Disbursement

/ /

Amount of Each Disbursement this Period

98.32

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

98.32

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00655</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="185.33"/></p>
<p>B. Full Name (Last, First, Middle Initial) JUBAN'S RESTAURANT, LA</p> <p>Mailing Address 3739 PERKINS RD</p> <p>City BATON ROUGE State LA Zip Code 70808</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00655M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="185.33"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) SHANNON REEVES</p> <p>Mailing Address 605 CLARIDAN RANCH RD</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00656</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3.75"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1707 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SHANNON REEVES	Transaction ID: 2009M04L21A00657 Date of Disbursement																			
	Mailing Address 605 CLARIDAN RANCH RD	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PARKING	<table border="1"><tr><td>14.00</td></tr></table>	14.00																		
14.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) SHANNON REEVES	Transaction ID: 2009M04L21A00658 Date of Disbursement																			
	Mailing Address 605 CLARIDAN RANCH RD	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PARKING	<table border="1"><tr><td>31.50</td></tr></table>	31.50																		
31.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) SHANNON REEVES	Transaction ID: 2009M04L21A00659 Date of Disbursement																			
	Mailing Address 605 CLARIDAN RANCH RD	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TAXI	<table border="1"><tr><td>9.75</td></tr></table>	9.75																		
9.75																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>55.25</td></tr></table>	55.25
55.25		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1708 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SHANNON REEVES	Transaction ID: 2009M04L21A00660
	Mailing Address 605 CLARIDAN RANCH RD	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period 13.00
	Purpose of Disbursement TAXI	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) SHANNON REEVES	Transaction ID: 2009M04L21A00661
	Mailing Address 605 CLARIDAN RANCH RD	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period 51.00
	Purpose of Disbursement TAXI	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) SHANNON REEVES	Transaction ID: 2009M04L21A00662
	Mailing Address 605 CLARIDAN RANCH RD	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period 124.50
	Purpose of Disbursement TAXI	Category/ Type
	Candidate Name	
	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)	▶	188.50
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1709 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SHANNON REEVES	Transaction ID: 2009M04L21A00663 Date of Disbursement																			
	Mailing Address 605 CLARIDAN RANCH RD	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TAXI'S	<table border="1"><tr><td>46.00</td></tr></table>	46.00																		
46.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00664 Date of Disbursement																			
	Mailing Address 631 PENNSYLVANIA AVE SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PHOTOGRAPHY SVS	<table border="1"><tr><td>199.78</td></tr></table>	199.78																		
199.78																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00665 Date of Disbursement																			
	Mailing Address 631 PENNSYLVANIA AVE SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PHOTOGRAPHY SVS	<table border="1"><tr><td>416.04</td></tr></table>	416.04																		
416.04																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>661.82</td></tr></table>	661.82
661.82		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1710 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00666 Date of Disbursement
	Mailing Address 631 PENNSYLVANIA AVE SE	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PHOTOGRAPHY SVS	<input type="text" value="581.63"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00667 Date of Disbursement
	Mailing Address 631 PENNSYLVANIA AVE SE	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement VIDEO PRODUCTION	<input type="text" value="416.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00668 Date of Disbursement
	Mailing Address 631 PENNSYLVANIA AVE SE	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement VIDEO PRODUCTION	<input type="text" value="416.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1413.71"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1711 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00669 Date of Disbursement
	Mailing Address 631 PENNSYLVANIA AVE SE	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement VIDEO PRODUCTION	<input type="text" value="416.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00670 Date of Disbursement
	Mailing Address 631 PENNSYLVANIA AVE SE	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement VIDEO PRODUCTION	<input type="text" value="959.09"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00671 Date of Disbursement
	Mailing Address 631 PENNSYLVANIA AVE SE	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement VIDEO PRODUCTION	<input type="text" value="959.09"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2334.22"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00672 Date of Disbursement
	Mailing Address 631 PENNSYLVANIA AVE SE	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement VIDEO PRODUCTION	<input type="text" value="959.09"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) REFLECTIONS PHOTOGRAPHY, INC	Transaction ID: 2009M04L21A00673 Date of Disbursement
	Mailing Address 631 PENNSYLVANIA AVE SE	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement VIDEO PRODUCTION	<input type="text" value="959.12"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RIS PAPER	Transaction ID: 2009M04L21A00674 Date of Disbursement
	Mailing Address P O BOX 641617	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City PITTSBURGH State PA Zip Code 15264-1617	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="1426.36"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3344.57"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT</p> <p>Mailing Address 310 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement FED UNEMPL. TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00675 Date of Disbursement 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 391.01</p>
<p>B. Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE</p> <p>Mailing Address 11601 ROOSEVELT BLVD</p> <p>City PHILADELPHIA State PA Zip Code 19154</p> <p>Purpose of Disbursement FED UNEMPL. TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00675M Date of Disbursement 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 391.01</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT</p> <p>Mailing Address 310 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement FED UNEMPL. TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00676 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 519.80</p>

SUBTOTAL of Disbursements This Page (optional) ▶

910.81

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE</p> <p>Mailing Address 11601 ROOSEVELT BLVD</p> <p>City PHILADELPHIA State PA Zip Code 19154</p> <p>Purpose of Disbursement FED UNEMPL. TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00676M Date of Disbursement: MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 519.80</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT</p> <p>Mailing Address 310 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement GARNISHMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00677 Date of Disbursement: MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) CA STATE DISBURSEMENT UNIT</p> <p>Mailing Address PO BOX 989067</p> <p>City W. SACRAMENTO State CA Zip Code 95798</p> <p>Purpose of Disbursement GARNISHMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00677M Date of Disbursement: MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT <hr/> Mailing Address 310 FIRST STREET, SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement GARNISHMENT Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00678 Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) CA STATE DISBURSEMENT UNIT <hr/> Mailing Address PO BOX 989067 <hr/> City W. SACRAMENTO State CA Zip Code 95798 <hr/> Purpose of Disbursement GARNISHMENT Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00678M Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 500.00 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT <hr/> Mailing Address 310 FIRST STREET, SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement PAYROLL TAXES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00679 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 4331.59

SUBTOTAL of Disbursements This Page (optional) ►

4831.59

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) GOVT OF THE DIST OF COLUMBIA</p> <p>Mailing Address OFFICE OF TAX & REVENUE PO BOX 7862</p> <p>City WASHINGTON State DC Zip Code 20044</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00679M Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 4331.59</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT</p> <p>Mailing Address 310 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00680 Date of Disbursement 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4499.78</p>
<p>C. Full Name (Last, First, Middle Initial) GOVT OF THE DIST OF COLUMBIA</p> <p>Mailing Address OFFICE OF TAX & REVENUE PO BOX 7862</p> <p>City WASHINGTON State DC Zip Code 20044</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00680M Date of Disbursement 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4499.78</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	4499.78
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1717 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT	Transaction ID: 2009M04L21A00681 Date of Disbursement
	Mailing Address 310 FIRST STREET, SE	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="4877.54"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MARYLAND STATE COMPTROLLER	Transaction ID: 2009M04L21A00681M Date of Disbursement
	Mailing Address OF THE TREASURY 110 CARROLL STREET	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City ANNAPOLIS State MD Zip Code 21411	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="4877.54"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT	Transaction ID: 2009M04L21A00682 Date of Disbursement
	Mailing Address 310 FIRST STREET, SE	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement PAYROLL TAXES	<input type="text" value="4912.61"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9790.15"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1718 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VIRGINIA COMMONWEALTH DEPT</p> <p>Mailing Address OF TAXATION</p> <p>City RICHMOND State VA Zip Code 23218</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00682M Date of Disbursement: MM / DD / YYYY 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 4912.61</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT</p> <p>Mailing Address 310 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00683 Date of Disbursement: MM / DD / YYYY 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5004.30</p>
<p>C. Full Name (Last, First, Middle Initial) MARYLAND STATE COMPTROLLER</p> <p>Mailing Address OF THE TREASURY 110 CARROLL STREET</p> <p>City ANNAPOLIS State MD Zip Code 21411</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00683M Date of Disbursement: MM / DD / YYYY 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5004.30</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	5004.30
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT</p> <p>Mailing Address 310 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00684 Date of Disbursement 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5057.43</p>
<p>B. Full Name (Last, First, Middle Initial) VIRGINIA COMMONWEALTH DEPT</p> <p>Mailing Address OF TAXATION</p> <p>City RICHMOND State VA Zip Code 23218</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00684M Date of Disbursement 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 5057.43</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT</p> <p>Mailing Address 310 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00685 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 36810.25</p>

SUBTOTAL of Disbursements This Page (optional) ▶

41867.68

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE</p> <p>Mailing Address 11601 ROOSEVELT BLVD</p> <p>City PHILADELPHIA State PA Zip Code 19154</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00685M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">36810.25</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	36810.25
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
36810.25																						
<p>B. Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT</p> <p>Mailing Address 310 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00686</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">40098.32</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	9	40098.32
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	0		2	0	0	9													
40098.32																						
<p>C. Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE</p> <p>Mailing Address 11601 ROOSEVELT BLVD</p> <p>City PHILADELPHIA State PA Zip Code 19154</p> <p>Purpose of Disbursement PAYROLL TAXES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00686M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">40098.32</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	9	40098.32
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	0		2	0	0	9													
40098.32																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td style="font-weight: bold;">40098.32</td> </tr> </table>	40098.32
40098.32		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td style="height: 20px;"></td> </tr> </table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT Mailing Address 310 FIRST STREET, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL TAXES Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 2009M04L21A00687 Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 40486.49
B.	Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE Mailing Address 11601 ROOSEVELT BLVD City PHILADELPHIA State PA Zip Code 19154 Purpose of Disbursement PAYROLL TAXES Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 2009M04L21A00687M Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 40486.49 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT Mailing Address 310 FIRST STREET, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL TRANSFER Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 2009M04L21A00688 Date of Disbursement 03 / 30 / 2009 Amount of Each Disbursement this Period 44237.61

SUBTOTAL of Disbursements This Page (optional)	84724.10
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) INTERNAL REVENUE SERVICE Mailing Address 11601 ROOSEVELT BLVD City PHILADELPHIA State PA Zip Code 19154 Purpose of Disbursement PAYROLL TRANSFER Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00688M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 44237.61 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT Mailing Address 310 FIRST STREET, SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement UNEMPL. TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00689 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1358.56 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) GOVT OF THE DIST OF COLUMBIA Mailing Address OFFICE OF TAX & REVENUE PO BOX 7862 City WASHINGTON State DC Zip Code 20044 Purpose of Disbursement UNEMPL. TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00689M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1358.56 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	1358.56
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RNC-PAYROLL ACCOUNT <hr/> Mailing Address 310 FIRST STREET, SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement UNEMPL. TAXES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00690 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1424.62
B.	Full Name (Last, First, Middle Initial) GOVT OF THE DIST OF COLUMBIA <hr/> Mailing Address OFFICE OF TAX & REVENUE PO BOX 7862 <hr/> City WASHINGTON State DC Zip Code 20044 <hr/> Purpose of Disbursement UNEMPL. TAXES Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00690M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1424.62 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) RNC-WITHHOLDING <hr/> Mailing Address 310 FIRST STREET, SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement EMPLOYEE DEDUCTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00691 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 157.50

SUBTOTAL of Disbursements This Page (optional) ▶	1582.12
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1724 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) RNC-WITHHOLDING</p> <p>Mailing Address 310 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement EMPLOYEE DEDUCTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00692</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">162.50</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0	9	162.50
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	0	9													
162.50																						
<p>B. Full Name (Last, First, Middle Initial) ROSWELL PARKS & RECREATION</p> <p>Mailing Address DEPARTMENT PO BOX 1838</p> <p>City ROSWELL State NM Zip Code 88202</p> <p>Purpose of Disbursement EQUIPMENT RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00693</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	3100.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
3100.00																						
<p>C. Full Name (Last, First, Middle Initial) ROSWELL RENTAL, INC</p> <p>Mailing Address 116 EAST COLLEGE</p> <p>City ROSWELL State NM Zip Code 88201</p> <p>Purpose of Disbursement EQUIPMENT RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00694</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">248.68</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	248.68
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
248.68																						

SUBTOTAL of Disbursements This Page (optional) ▶

3511.18

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)

PAGE 1725 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00695 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO BOX 228	Amount of Each Disbursement this Period 317.99
	City FOREST State VA Zip Code 24551	
	Purpose of Disbursement POSTAGE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00696 Date of Disbursement 03 / 23 / 2009
	Mailing Address PO BOX 228	Amount of Each Disbursement this Period 347.00
	City FOREST State VA Zip Code 24551	
	Purpose of Disbursement POSTAGE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00697 Date of Disbursement 03 / 10 / 2009
	Mailing Address PO BOX 228	Amount of Each Disbursement this Period 380.53
	City FOREST State VA Zip Code 24551	
	Purpose of Disbursement POSTAGE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1045.52

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1726 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00698
	Mailing Address PO BOX 228	Date of Disbursement MM / DD / YYYY 03 / 10 / 2009
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 451.64
	Purpose of Disbursement POSTAGE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00699
	Mailing Address PO BOX 228	Date of Disbursement MM / DD / YYYY 03 / 10 / 2009
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 2285.88
	Purpose of Disbursement POSTAGE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00700
	Mailing Address PO BOX 228	Date of Disbursement MM / DD / YYYY 03 / 27 / 2009
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 42572.39
	Purpose of Disbursement POSTAGE	Category/Type
	Candidate Name	
	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)	45309.91
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00701
	Mailing Address PO BOX 228	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 2993.66
	Purpose of Disbursement PRINT,MAIL PRODUCTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00702
	Mailing Address PO BOX 228	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 3411.89
	Purpose of Disbursement PRINT,MAIL PRODUCTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00703
	Mailing Address PO BOX 228	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 3753.00
	Purpose of Disbursement PRINT,MAIL PRODUCTION	Category/ Type
	Candidate Name	
	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)	▶	10158.55
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1728 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00704
	Mailing Address PO BOX 228	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 6051.12
	Purpose of Disbursement PRINT,MAIL PRODUCTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00705
	Mailing Address PO BOX 228	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 6989.30
	Purpose of Disbursement PRINT,MAIL PRODUCTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00706
	Mailing Address PO BOX 228	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period 7478.69
	Purpose of Disbursement PRINT,MAIL PRODUCTION	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	20519.11
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00710 Date of Disbursement
	Mailing Address ATTN: LARA BURFORD 1272 CORPORATE PARK ROAD	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE	<input type="text" value="1355.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00711 Date of Disbursement
	Mailing Address ATTN: LARA BURFORD 1272 CORPORATE PARK ROAD	<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE	<input type="text" value="1547.84"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RST MARKETING ASSOCIATES, INC	Transaction ID: 2009M04L21A00712 Date of Disbursement
	Mailing Address ATTN: LARA BURFORD 1272 CORPORATE PARK ROAD	<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City FOREST State VA Zip Code 24551	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE	<input type="text" value="1664.76"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4568.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GORDON SCHOEPFLE	Transaction ID: 2009M04L21A00719 Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	Mailing Address 6520 CHESTERFIELD AVE	Amount of Each Disbursement this Period 75.00
	City MCLEAN State VA Zip Code 22101	
	Purpose of Disbursement INTERNET SERVICES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) AT & T MOBILITY	Transaction ID: 2009M04L21A00719M Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	Mailing Address P O BOX 6463	Amount of Each Disbursement this Period 75.00
	City CAROL STREAM State IL Zip Code 60197	
	Purpose of Disbursement INTERNET SERVICES	Category/Type
	Candidate Name	
	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:	

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) GORDON SCHOEPFLE	Transaction ID: 2009M04L21A00720 Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	Mailing Address 6520 CHESTERFIELD AVE	Amount of Each Disbursement this Period 6.60
	City MCLEAN State VA Zip Code 22101	
	Purpose of Disbursement METROFARE	Category/Type
	Candidate Name	
	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)	81.60
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) GORDON SCHOEPFLE</p> <p>Mailing Address 6520 CHESTERFIELD AVE</p> <p>City MCLEAN State VA Zip Code 22101</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00721</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.65"/></p>
<p>B. Full Name (Last, First, Middle Initial) CVS PHARMACY, FALLS CHURCH VA</p> <p>Mailing Address 1150 WEST BROAD ST</p> <p>City FALLS CHURCH State VA Zip Code 22046</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00721M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.65"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) GORDON SCHOEPFLE</p> <p>Mailing Address 6520 CHESTERFIELD AVE</p> <p>City MCLEAN State VA Zip Code 22101</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00722</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="39.99"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="56.64"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RAMKA, LTD	Transaction ID: 2009M04L21A00722M
	Mailing Address INTERNET	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City LIVE, UKRAINE State ZZ Zip Code	Amount of Each Disbursement this Period 39.99
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) GORDON SCHOEPFLE	Transaction ID: 2009M04L21A00723
	Mailing Address 6520 CHESTERFIELD AVE	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City MCLEAN State VA Zip Code 22101	Amount of Each Disbursement this Period 83.16
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) ITUNES, MCLEAN VA	Transaction ID: 2009M04L21A00723M
	Mailing Address 6520 CHESTERFIELD AVE	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City MCLEAN State VA Zip Code 22101	Amount of Each Disbursement this Period 83.16
	Purpose of Disbursement OFFICE SUPPLIES	[MEMO ITEM]
	Candidate Name	
	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)	▶	83.16
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SECURITAS SECURITY SERVICES</p> <p>Mailing Address USA, INC. P O BOX 403412</p> <p>City ATLANTA State GA Zip Code 30384-3412</p> <p>Purpose of Disbursement SECURITY SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00728</p> <p>Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 6372.72</p>
<p>B. Full Name (Last, First, Middle Initial) SECURITAS SECURITY SERVICES</p> <p>Mailing Address USA, INC. P O BOX 403412</p> <p>City ATLANTA State GA Zip Code 30384-3412</p> <p>Purpose of Disbursement SECURITY SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00729</p> <p>Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 6410.88</p>
<p>C. Full Name (Last, First, Middle Initial) SECURITAS SECURITY SERVICES</p> <p>Mailing Address USA, INC. P O BOX 403412</p> <p>City ATLANTA State GA Zip Code 30384-3412</p> <p>Purpose of Disbursement SECURITY SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00730</p> <p>Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 6410.88</p>

SUBTOTAL of Disbursements This Page (optional) ►

19194.48

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SECURITAS SECURITY SERVICES</p> <p>Mailing Address USA, INC. P O BOX 403412</p> <p>City ATLANTA State GA Zip Code 30384-3412</p> <p>Purpose of Disbursement SECURITY SERVICES-VENDOR CREDIT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00731 Date of Disbursement: 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period -114.48</p>
<p>B. Full Name (Last, First, Middle Initial) JENNIFER SHEEHAN</p> <p>Mailing Address 1341 CORCORAN ST NW APT B</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement BAR DUES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00732 Date of Disbursement: 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 675.00</p>
<p>C. Full Name (Last, First, Middle Initial) DC COURT OF APPEALS</p> <p>Mailing Address COMM ON ADMISSIONS 500 INDIANA AVE NW, ROOM 4200</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement BAR DUES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00732M Date of Disbursement: 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 675.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

560.52

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JENNIFER SHEEHAN</p> <p>Mailing Address 1341 CORCORAN ST NW APT B</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00733</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="42.97"/></p>
<p>B. Full Name (Last, First, Middle Initial) GOOD STUFF, WASHINGTON DC</p> <p>Mailing Address 303 PENNSYLVANIA AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00733M</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="42.97"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) JENNIFER SHEEHAN</p> <p>Mailing Address 1341 CORCORAN ST NW APT B</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00734</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="48.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="90.97"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JENNIFER SHEEHAN</p> <p>Mailing Address 1341 CORCORAN ST NW APT B</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00735 Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 48.00</p>
<p>B. Full Name (Last, First, Middle Initial) JENNIFER SHEEHAN</p> <p>Mailing Address 1341 CORCORAN ST NW APT B</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement PARKING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00736 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 60.00</p>
<p>C. Full Name (Last, First, Middle Initial) JENNIFER SHEEHAN</p> <p>Mailing Address 1341 CORCORAN ST NW APT B</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00737 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 7.00</p>

SUBTOTAL of Disbursements This Page (optional)	115.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) HEATHER SIDWELL	Transaction ID: 2009M04L21A00738 Date of Disbursement																			
	Mailing Address 3731 JENIFER ST NW	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20015	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>28.60</td></tr></table>	28.60																		
28.60																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) DOMINO'S PIZZA, WASHINGTON DC	Transaction ID: 2009M04L21A00738M Date of Disbursement																			
	Mailing Address 1500 PENNSYLVANIA AVE SE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>28.60</td></tr></table>	28.60																		
28.60																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) HEATHER SIDWELL	Transaction ID: 2009M04L21A00739 Date of Disbursement																			
	Mailing Address 3731 JENIFER ST NW	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20015	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TAXI	<table border="1"><tr><td>19.00</td></tr></table>	19.00																		
19.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>47.60</td></tr></table>	47.60
47.60		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BILL SKELLY	Transaction ID: 2009M04L21A00740 Date of Disbursement 03 / 11 / 2009
	Mailing Address 703 METAIRIE LAWN DRIVE	Amount of Each Disbursement this Period 2520.00
	City METAIRIE State LA Zip Code 70001	
	Purpose of Disbursement CONSULTING-LIST DEVELOPMENT	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SMARTTECH CORPORATION	Transaction ID: 2009M04L21A00741 Date of Disbursement 03 / 05 / 2009
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	Amount of Each Disbursement this Period 8000.00
	City CHATTANOOGA State TN Zip Code 37401	
	Purpose of Disbursement DATA MANAGEMENT SERVICES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SMARTTECH CORPORATION	Transaction ID: 2009M04L21A00742 Date of Disbursement 03 / 11 / 2009
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	Amount of Each Disbursement this Period 8000.00
	City CHATTANOOGA State TN Zip Code 37401	
	Purpose of Disbursement DATA MANAGEMENT SERVICES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	18520.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00743 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DATA STORAGE	<table border="1"><tr><td>23.23</td></tr></table>	23.23																		
23.23																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				
B.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00744 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DOMAIN NAME REGISTRATION	<table border="1"><tr><td>53.85</td></tr></table>	53.85																		
53.85																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				
C.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00745 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DOMAIN NAME REGISTRATION	<table border="1"><tr><td>95.95</td></tr></table>	95.95																		
95.95																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional) ►

173.03

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00746 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement EMAIL HOSTING	<table border="1"><tr><td>598.65</td></tr></table>	598.65																		
598.65																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00747 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement EMAIL SERVICES	<table border="1"><tr><td>819.65</td></tr></table>	819.65																		
819.65																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00748 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement EMAIL SERVICES	<table border="1"><tr><td>819.65</td></tr></table>	819.65																		
819.65																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2237.95</td></tr></table>	2237.95
2237.95		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00749 Date of Disbursement 03 / 05 / 2009
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	Amount of Each Disbursement this Period 8150.00
	City CHATTANOOGA State TN Zip Code 37401	
	Purpose of Disbursement INTERNET CONNECTION	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00750 Date of Disbursement 03 / 11 / 2009
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	Amount of Each Disbursement this Period 8150.00
	City CHATTANOOGA State TN Zip Code 37401	
	Purpose of Disbursement INTERNET CONNECTION	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00751 Date of Disbursement 03 / 11 / 2009
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	Amount of Each Disbursement this Period 49.00
	City CHATTANOOGA State TN Zip Code 37401	
	Purpose of Disbursement WEB HOSTING	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

16349.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00752 Date of Disbursement
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB HOSTING	<input type="text" value="1950.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00753 Date of Disbursement
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB HOSTING	<input type="text" value="3540.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00754 Date of Disbursement
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB HOSTING	<input type="text" value="3540.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9030.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00755 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement WEB HOSTING	<table border="1"><tr><td>3540.00</td></tr></table>	3540.00																		
3540.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00756 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement WEB HOSTING	<table border="1"><tr><td>5390.00</td></tr></table>	5390.00																		
5390.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00757 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement WEB HOSTING	<table border="1"><tr><td>30257.50</td></tr></table>	30257.50																		
30257.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>39187.50</td></tr></table>	39187.50
39187.50		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00758 Date of Disbursement 03 / 11 / 2009
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	Amount of Each Disbursement this Period 30257.50
	City CHATTANOOGA State TN Zip Code 37401	
	Purpose of Disbursement WEB HOSTING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00759 Date of Disbursement 03 / 05 / 2009
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	Amount of Each Disbursement this Period 47950.00
	City CHATTANOOGA State TN Zip Code 37401	
	Purpose of Disbursement WEB HOSTING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00760 Date of Disbursement 03 / 11 / 2009
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	Amount of Each Disbursement this Period 47950.00
	City CHATTANOOGA State TN Zip Code 37401	
	Purpose of Disbursement WEB HOSTING	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	126157.50
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00761 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement WEB HOSTING	<table border="1"><tr><td>55552.50</td></tr></table>	55552.50																		
55552.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) SMARTECH CORPORATION	Transaction ID: 2009M04L21A00762 Date of Disbursement																			
	Mailing Address A DIVISION OF AIRNET GROUP, INC PO BOX 11181	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City CHATTANOOGA State TN Zip Code 37401	Amount of Each Disbursement this Period																			
	Purpose of Disbursement WEB HOSTING	<table border="1"><tr><td>55552.50</td></tr></table>	55552.50																		
55552.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00763 Date of Disbursement																			
	Mailing Address 16200 BRANCH CT	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period																			
	Purpose of Disbursement OFFICE SUPPLIES	<table border="1"><tr><td>3.50</td></tr></table>	3.50																		
3.50																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>111108.50</td></tr></table>	111108.50
111108.50		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1751 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00764
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.50
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00765
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.50
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00766
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.50
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	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)	▶	10.50
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1752 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00767
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.50
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00768
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.51
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00769
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.51
	Purpose of Disbursement OFFICE SUPPLIES	Category/Type
	Candidate Name	
	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)	10.52
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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PAGE 1753 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00770
	Mailing Address 16200 BRANCH CT	Date of Disbursement 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.51
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00771
	Mailing Address 16200 BRANCH CT	Date of Disbursement 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.51
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00772
	Mailing Address 16200 BRANCH CT	Date of Disbursement 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.51
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	10.53
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00773
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.51
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00774
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.51
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00775
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.51
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	10.53
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1755 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SNOW VALLEY, INC</p> <p>Mailing Address 16200 BRANCH CT</p> <p>City UPPER MARLBORO State MD Zip Code 20774</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00776</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">3.51</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		3.51
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
3.51																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) SNOW VALLEY, INC</p> <p>Mailing Address 16200 BRANCH CT</p> <p>City UPPER MARLBORO State MD Zip Code 20774</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00777</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">3.51</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		3.51
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
3.51																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SNOW VALLEY, INC</p> <p>Mailing Address 16200 BRANCH CT</p> <p>City UPPER MARLBORO State MD Zip Code 20774</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00778</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">3.51</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9		3.51
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	1		2	0	9														
3.51																						

SUBTOTAL of Disbursements This Page (optional)	10.53
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00779
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 3.51
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SNOW VALLEY, INC	Transaction ID: 2009M04L21A00780
	Mailing Address 16200 BRANCH CT	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City UPPER MARLBORO State MD Zip Code 20774	Amount of Each Disbursement this Period 7.00
	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) THE SORRENTO GROUP	Transaction ID: 2009M04L21A00781
	Mailing Address PO BOX 10806	Date of Disbursement MM / DD / YYYY 03 / 10 / 2009
	City PORTLAND State ME Zip Code 04104	Amount of Each Disbursement this Period 10000.00
	Purpose of Disbursement POLITICAL CONSULTING	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10010.51
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SPALDING GROUP	Transaction ID: 2009M04L21A00782 Date of Disbursement
	Mailing Address 2306 FRANKFORT AVE	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City LOUISVILLE State KY Zip Code 40206	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="3734.42"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SPRING RIVER GOLF COURSE	Transaction ID: 2009M04L21A00783 Date of Disbursement
	Mailing Address 1612 WEST EIGHT STREET	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City ROSWELL State NM Zip Code 88201	Amount of Each Disbursement this Period
	Purpose of Disbursement EQUIPMENT RENTAL	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STANLEY SECURITY SOLUTIONS INC	Transaction ID: 2009M04L21A00784 Date of Disbursement
	Mailing Address DEPT CH 14202	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City PALATINE State IL Zip Code 60055	Amount of Each Disbursement this Period
	Purpose of Disbursement KEYS	<input type="text" value="207.06"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4141.48"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) SHAWN STEEL</p> <p>Mailing Address 27520 HAWTHORNE BLVD STE 270</p> <p>City PALOS VERDES State CA Zip Code 90274</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00785 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 401.20</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) EXPEDIA</p> <p>Mailing Address 10190 COVINGTON CROSS DR</p> <p>City LAS VEGAS State NV Zip Code 89144</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00785M Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 401.20</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) SHAWN STEEL</p> <p>Mailing Address 27520 HAWTHORNE BLVD STE 270</p> <p>City PALOS VERDES State CA Zip Code 90274</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00786 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 688.20</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1089.40

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) UNITED AIRLINES	Transaction ID: 2009M04L21A00786M Date of Disbursement 03 / 19 / 2009
	Mailing Address PO BOX 2013	
	City CHICAGO State IL Zip Code 60673	Amount of Each Disbursement this Period 688.20
	Purpose of Disbursement AIR FARE Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SHAWN STEEL	Transaction ID: 2009M04L21A00787 Date of Disbursement 03 / 19 / 2009
	Mailing Address 27520 HAWTHORNE BLVD STE 270	
	City PALOS VERDES State CA Zip Code 90274	Amount of Each Disbursement this Period 784.20
	Purpose of Disbursement AIR FARE Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) UNITED AIRLINES	Transaction ID: 2009M04L21A00787M Date of Disbursement 03 / 19 / 2009
	Mailing Address PO BOX 2013	
	City CHICAGO State IL Zip Code 60673	Amount of Each Disbursement this Period 784.20
	Purpose of Disbursement AIR FARE Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	784.20
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SHAWN STEEL</p> <p>Mailing Address 27520 HAWTHORNE BLVD STE 270</p> <p>City PALOS VERDES State CA Zip Code 90274</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00788 Date of Disbursement: MM / DD / YYYY 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 114.54</p>
<p>B. Full Name (Last, First, Middle Initial) WESTIN GRAND WASHINGTON DC</p> <p>Mailing Address 2350 M ST NW</p> <p>City WASHINGTON State DC Zip Code 20037</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00788M Date of Disbursement: MM / DD / YYYY 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 114.54</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) SHAWN STEEL</p> <p>Mailing Address 27520 HAWTHORNE BLVD STE 270</p> <p>City PALOS VERDES State CA Zip Code 90274</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00789 Date of Disbursement: MM / DD / YYYY 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 125.94</p>

SUBTOTAL of Disbursements This Page (optional) ▶

240.48

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) HILTON WASHINGTON EMBASSY ROW</p> <p>Mailing Address 2015 MASS AVE NW</p> <p>City WASHINGTON State DC Zip Code 20036</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00789M Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 125.94</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) SHAWN STEEL</p> <p>Mailing Address 27520 HAWTHORNE BLVD STE 270</p> <p>City PALOS VERDES State CA Zip Code 90274</p> <p>Purpose of Disbursement TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00790 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 130.10</p>
<p>C. Full Name (Last, First, Middle Initial) SHAWN STEEL</p> <p>Mailing Address 27520 HAWTHORNE BLVD STE 270</p> <p>City PALOS VERDES State CA Zip Code 90274</p> <p>Purpose of Disbursement TAXI</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00791 Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 135.50</p>

SUBTOTAL of Disbursements This Page (optional)	265.60
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement FUEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00792</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00793</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="245.31"/></p>
<p>C. Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES</p> <p>Mailing Address 200 C. STREET SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00793M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="245.31"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="266.31"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00794 Date of Disbursement 03 / 26 / 2009
	Mailing Address 3101 HEMLOCK HILLS LN	Amount of Each Disbursement this Period 518.44
	City APEX State NC Zip Code 27539	
	Purpose of Disbursement LODGING	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CROWNE PLAZA, ALEXANDRIA VA	Transaction ID: 2009M04L21A00794M Date of Disbursement 03 / 26 / 2009
	Mailing Address 901 N FAIRFAX ST	Amount of Each Disbursement this Period 518.44
	City ALEXANDRIA State VA Zip Code 22314	
	Purpose of Disbursement LODGING	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00795 Date of Disbursement 03 / 05 / 2009
	Mailing Address 3101 HEMLOCK HILLS LN	Amount of Each Disbursement this Period 804.58
	City APEX State NC Zip Code 27539	
	Purpose of Disbursement LODGING	
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1323.02
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) HOLIDAY INN HISTORICAL ALEX.</p> <p>Mailing Address 625 FIRST STREET</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00795M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 804.58</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00796 Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 957.24</p>
<p>C. Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES</p> <p>Mailing Address 200 C. STREET SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00796M Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 957.24</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

957.24

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00797 Date of Disbursement 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 1441.86</p>
<p>B. Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES</p> <p>Mailing Address 200 C. STREET SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00797M Date of Disbursement 03 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 1441.86</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00798 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 4.46</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1446.32

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)

PAGE 1766 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
MCDONALD'S, HENDERSON NC

Mailing Address 1421 ANDREWS AVENUE

City HENDERSON State NC Zip Code 27536

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00798M
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

4.46

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
MARK STEPHENS

Mailing Address 3101 HEMLOCK HILLS LN

City APEX State NC Zip Code 27539

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00799
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

5.37

C.

Full Name (Last, First, Middle Initial)
MCDONALD'S, ASHLAND VA

Mailing Address 103 S CARTER RD

City ASHLAND State VA Zip Code 23005

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00799M
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

5.37

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

5.37

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00800 Date of Disbursement 03 / 26 / 2009
	Mailing Address 3101 HEMLOCK HILLS LN	Amount of Each Disbursement this Period 12.75
	City APEX State NC Zip Code 27539	
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) POTBELLY, WASHINGTON DC	Transaction ID: 2009M04L21A00800M Date of Disbursement 03 / 26 / 2009
	Mailing Address 409 3RD STREET SW	Amount of Each Disbursement this Period 12.75
	City WASHINGTON State DC Zip Code 20024	
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00801 Date of Disbursement 03 / 05 / 2009
	Mailing Address 3101 HEMLOCK HILLS LN	Amount of Each Disbursement this Period 16.03
	City APEX State NC Zip Code 27539	
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	28.78
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) HOLIDAY INN HISTORICAL ALEX.</p> <p>Mailing Address 625 FIRST STREET</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00801M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">16.03</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	16.03
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
16.03																						
<p>B. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00802</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">16.50</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	9	16.50
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	0		2	0	0	9													
16.50																						
<p>C. Full Name (Last, First, Middle Initial) POURHOUSE, WASHINGTON DC</p> <p>Mailing Address 319 PENN AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00802M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">16.50</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	9	16.50
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	0		2	0	0	9													
16.50																						

SUBTOTAL of Disbursements This Page (optional) ▶

16.50

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00803 Date of Disbursement 03 / 05 / 2009
	Mailing Address 3101 HEMLOCK HILLS LN	Amount of Each Disbursement this Period 22.72
	City APEX State NC Zip Code 27539	
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB	Transaction ID: 2009M04L21A00803M Date of Disbursement 03 / 05 / 2009
	Mailing Address 300 FIRST STREET, SE	Amount of Each Disbursement this Period 22.72
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00804 Date of Disbursement 03 / 12 / 2009
	Mailing Address 3101 HEMLOCK HILLS LN	Amount of Each Disbursement this Period 23.20
	City APEX State NC Zip Code 27539	
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	45.92
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1770 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TORTILLA COAST, WASHINGTON DC</p> <p>Mailing Address 400 FIRST ST SE</p> <p>City WASHINGTON State DC Zip Code 20016</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00804M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">23.20</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	0	9	23.20
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	2		2	0	0	9													
23.20																						
<p>B. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00805</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">23.61</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9	23.61
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	0	9													
23.61																						
<p>C. Full Name (Last, First, Middle Initial) CROWNE PLAZA, ALEXANDRIA VA</p> <p>Mailing Address 901 N FAIRFAX ST</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00805M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">23.61</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0	9	23.61
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	6		2	0	0	9													
23.61																						

SUBTOTAL of Disbursements This Page (optional) ▶

23.61

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1771 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00806</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">31.94</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	9	31.94
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	0		2	0	0	9													
31.94																						
<p>B. Full Name (Last, First, Middle Initial) TAVERNA THE GREEK ISLANDS</p> <p>Mailing Address 305 PENN AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00806M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">31.94</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	9	31.94
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	0		2	0	0	9													
31.94																						
<p>C. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00807</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">32.28</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	9	32.28
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		2	0		2	0	0	9													
32.28																						

SUBTOTAL of Disbursements This Page (optional) ▶

64.22

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TORTILLA COAST, WASHINGTON DC</p> <p>Mailing Address 400 FIRST ST SE</p> <p>City WASHINGTON State DC Zip Code 20016</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00807M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="32.28"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00808</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="32.55"/></p>
<p>C. Full Name (Last, First, Middle Initial) TAVERNA THE GREEK ISLANDS</p> <p>Mailing Address 305 PENN AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00808M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="32.55"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1773 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00809</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">33.49</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	9		33.49
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	2		2	0	9														
33.49																						
<p>B. Full Name (Last, First, Middle Initial) HAWK & DOVE, WASHINGTON DC</p> <p>Mailing Address 329 PENNSYLVANIA AVE</p> <p>City WASHINGTON State DC Zip Code 20036</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00809M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">33.49</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	9		33.49
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	2		2	0	9														
33.49																						
<p>C. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00810</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">36.20</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	9		36.20
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	9														
36.20																						

SUBTOTAL of Disbursements This Page (optional)	69.69
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CHINATOWN EXPRESS REST, WDC</p> <p>Mailing Address 744-746 6TH ST NW</p> <p>City WASHINGTON State DC Zip Code 20001</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00810M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">36.20</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	36.20
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
36.20																						
<p>B. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00811</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">40.48</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	40.48
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
40.48																						
<p>C. Full Name (Last, First, Middle Initial) I.H.O.P. #578</p> <p>Mailing Address 3425 A JEFFERSON DAVIS HWY</p> <p>City ALEXNADRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00811M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">40.48</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	40.48
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
40.48																						

SUBTOTAL of Disbursements This Page (optional) ▶

40.48

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)

PAGE 1775 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00812</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="54.84"/></p>
<p>B. Full Name (Last, First, Middle Initial) TAVERNA THE GREEK ISLANDS</p> <p>Mailing Address 305 PENN AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00812M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="54.84"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00813</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="56.10"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="110.94"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1776 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SONOMA, WASHINGTON DC</p> <p>Mailing Address 223 PENNSYLVANIA AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00813M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="56.10"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00814</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="57.03"/></p>
<p>C. Full Name (Last, First, Middle Initial) BOBBY VANS GRILLE, WDC</p> <p>Mailing Address 1201 NEW YORK AVE NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00814M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="57.03"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="57.03"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1777 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00815 Date of Disbursement 03 / 05 / 2009	
	Mailing Address 3101 HEMLOCK HILLS LN		
	City APEX State NC Zip Code 27539 Purpose of Disbursement MEALS Candidate Name	Amount of Each Disbursement this Period 57.13	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) ASIAN BISTRO ALEXANDRIA,VA	Transaction ID: 2009M04L21A00815M Date of Disbursement 03 / 05 / 2009	
	Mailing Address 809 KING STREET		
	City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement MEALS Candidate Name	Amount of Each Disbursement this Period 57.13	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00816 Date of Disbursement 03 / 20 / 2009	
	Mailing Address 3101 HEMLOCK HILLS LN		
	City APEX State NC Zip Code 27539 Purpose of Disbursement MEALS Candidate Name	Amount of Each Disbursement this Period 62.25	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	119.38
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) DC COAST RESTAURANT, WDC Mailing Address 1401 K ST NW City WASHINGTON State DC Zip Code 20036 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00816M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 9 Amount of Each Disbursement this Period 62.25 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) MARK STEPHENS Mailing Address 3101 HEMLOCK HILLS LN City APEX State NC Zip Code 27539 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00817 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9 Amount of Each Disbursement this Period 73.02 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) BERTUCCI'S BRICKOVEN Mailing Address 725 KING STREET City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement MEALS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00817M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9 Amount of Each Disbursement this Period 73.02 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	73.02
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00818</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="160.31"/></p>
<p>B. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB</p> <p>Mailing Address 300 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00818M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="160.31"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00819</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="175.22"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

335.53

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CAPITOL HILL CLUB</p> <p>Mailing Address 300 FIRST STREET, SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00819M</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="175.22"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MILEAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00820</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="308.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) MARK STEPHENS</p> <p>Mailing Address 3101 HEMLOCK HILLS LN</p> <p>City APEX State NC Zip Code 27539</p> <p>Purpose of Disbursement MILEAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00821</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="308.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

616.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00822
	Mailing Address 3101 HEMLOCK HILLS LN	Date of Disbursement MM / DD / YYYY 03 / 12 / 2009
	City APEX State NC Zip Code 27539	Amount of Each Disbursement this Period 308.00
	Purpose of Disbursement MILEAGE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00823
	Mailing Address 3101 HEMLOCK HILLS LN	Date of Disbursement MM / DD / YYYY 03 / 20 / 2009
	City APEX State NC Zip Code 27539	Amount of Each Disbursement this Period 308.00
	Purpose of Disbursement MILEAGE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00824
	Mailing Address 3101 HEMLOCK HILLS LN	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City APEX State NC Zip Code 27539	Amount of Each Disbursement this Period 308.00
	Purpose of Disbursement MILEAGE Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	924.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00825 Date of Disbursement																			
	Mailing Address 3101 HEMLOCK HILLS LN	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	9													
	City APEX State NC Zip Code 27539	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TAXI	<table border="1"><tr><td>9.00</td></tr></table>	9.00																		
9.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00826 Date of Disbursement																			
	Mailing Address 3101 HEMLOCK HILLS LN	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	2		2	0	9													
	City APEX State NC Zip Code 27539	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TAXI	<table border="1"><tr><td>20.00</td></tr></table>	20.00																		
20.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) MARK STEPHENS	Transaction ID: 2009M04L21A00827 Date of Disbursement																			
	Mailing Address 3101 HEMLOCK HILLS LN	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	0		2	0	9													
	City APEX State NC Zip Code 27539	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TAXI	<table border="1"><tr><td>40.00</td></tr></table>	40.00																		
40.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>69.00</td></tr></table>	69.00
69.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN ST.MARTIN	Transaction ID: 2009M04L21A00828 Date of Disbursement
	Mailing Address 8929 ALLISTON HOLLOW WAY	<input type="text" value="03"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code GAITHERSBURG MD 20879	Amount of Each Disbursement this Period
	Purpose of Disbursement STAFF CONSULTING	<input type="text" value="5000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOHN ST.MARTIN	Transaction ID: 2009M04L21A00829 Date of Disbursement
	Mailing Address 8929 ALLISTON HOLLOW WAY	<input type="text" value="03"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code GAITHERSBURG MD 20879	Amount of Each Disbursement this Period
	Purpose of Disbursement STAFF CONSULTING	<input type="text" value="5000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STRATEGCO, LLC	Transaction ID: 2009M04L21A00830 Date of Disbursement
	Mailing Address 901 7TH ST NW SUITE 200	<input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code WASHINGTON DC 20001	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING-STAFF ASSISTANT	<input type="text" value="12000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="22000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING</p> <p>Mailing Address 7591 9TH STREET NORTH</p> <p>City SAINT PAUL State MN Zip Code 55128</p> <p>Purpose of Disbursement TELEMARKETING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00831</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="172.50"/></p>
<p>B. Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING</p> <p>Mailing Address 7591 9TH STREET NORTH</p> <p>City SAINT PAUL State MN Zip Code 55128</p> <p>Purpose of Disbursement TELEMARKETING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00832</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="370.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING</p> <p>Mailing Address 7591 9TH STREET NORTH</p> <p>City SAINT PAUL State MN Zip Code 55128</p> <p>Purpose of Disbursement TELEMARKETING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00833</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="410.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="952.50"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00834 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="510.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00835 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="560.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00836 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="797.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1867.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING <hr/> Mailing Address 7591 9TH STREET NORTH <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00837 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 822.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING <hr/> Mailing Address 7591 9TH STREET NORTH <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00838 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 995.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING <hr/> Mailing Address 7591 9TH STREET NORTH <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00839 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1026.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2843.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00840 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="1070.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00841 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="1096.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00842 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="1217.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3383.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00843 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="1379.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00844 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="1775.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00845 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="1970.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5124.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00846 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="5649.80"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00847 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="16545.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00848 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="20799.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="42994.30"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00849 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="28688.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00850 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="30423.98"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING	Transaction ID: 2009M04L21A00851 Date of Disbursement
	Mailing Address 7591 9TH STREET NORTH	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement TELEMARKETING	<input type="text" value="48774.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="107886.88"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING <hr/> Mailing Address 7591 9TH STREET NORTH <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00852 Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009
	Amount of Each Disbursement this Period 51182.94
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) STRATEGIC FUNDRAISING <hr/> Mailing Address 7591 9TH STREET NORTH <hr/> City SAINT PAUL State MN Zip Code 55128 <hr/> Purpose of Disbursement TELEMARKETING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00853 Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009
	Amount of Each Disbursement this Period 65075.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) ST REGIS, WASHINGTON DC <hr/> Mailing Address 923 16TH AND K ST NW <hr/> City WASHINGTON State DC Zip Code 20006 <hr/> Purpose of Disbursement LODGING Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00854 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009
	Amount of Each Disbursement this Period 2727.96
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	118985.90
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THOMPSON WEST	Transaction ID: 2009M04L21A00855 Date of Disbursement																			
	Mailing Address WEST PAYMENT CENTER PO BOX 6292	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City CAROL STREAM State IL Zip Code 60197	Amount of Each Disbursement this Period																			
	Purpose of Disbursement ONLINE CHARGES	<table border="1"><tr><td>5643.07</td></tr></table>	5643.07																		
5643.07																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) THOMPSON WEST	Transaction ID: 2009M04L21A00856 Date of Disbursement																			
	Mailing Address WEST PAYMENT CENTER PO BOX 6292	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City CAROL STREAM State IL Zip Code 60197	Amount of Each Disbursement this Period																			
	Purpose of Disbursement SUBSCRIPTION	<table border="1"><tr><td>178.19</td></tr></table>	178.19																		
178.19																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) THYSSEN KRUPP ELEVATOR	Transaction ID: 2009M04L21A00857 Date of Disbursement																			
	Mailing Address P O BOX 933007	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City ATLANTA State GA Zip Code 31193-3007	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MAINTENANCE	<table border="1"><tr><td>5081.46</td></tr></table>	5081.46																		
5081.46																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General																			
	State: District:	<input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>10902.72</td></tr></table>	10902.72
10902.72		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1793 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BOB TIERMAN</p> <p>Mailing Address 205 EVERGREEN STREET</p> <p>City LAKE OSNEGO State OR Zip Code 97034</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00858</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	100.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
100.00																						
<p>B. Full Name (Last, First, Middle Initial) ALASKA AIRLINES INC</p> <p>Mailing Address 20833 INTERNATIONAL BLVD</p> <p>City SEATTLE State WA Zip Code 98198</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00858M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">100.00</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	100.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
100.00																						
<p>C. Full Name (Last, First, Middle Initial) BOB TIERMAN</p> <p>Mailing Address 205 EVERGREEN STREET</p> <p>City LAKE OSNEGO State OR Zip Code 97034</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00859</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">395.40</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	395.40
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
395.40																						

SUBTOTAL of Disbursements This Page (optional)	495.40
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ALASKA AIRLINES INC	Transaction ID: 2009M04L21A00859M
	Mailing Address 20833 INTERNATIONAL BLVD	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City SEATTLE State WA Zip Code 98198	Amount of Each Disbursement this Period 395.40
	Purpose of Disbursement AIR FARE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) BOB TIERMAN	Transaction ID: 2009M04L21A00860
	Mailing Address 205 EVERGREEN STREET	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City LAKE OSNEGO State OR Zip Code 97034	Amount of Each Disbursement this Period 555.40
	Purpose of Disbursement AIR FARE	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) ALASKA AIRLINES INC	Transaction ID: 2009M04L21A00860M
	Mailing Address 20833 INTERNATIONAL BLVD	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City SEATTLE State WA Zip Code 98198	Amount of Each Disbursement this Period 555.40
	Purpose of Disbursement AIR FARE	[MEMO ITEM]
	Candidate Name	
	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)	▶	555.40
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BOB TIERMAN</p> <p>Mailing Address 205 EVERGREEN STREET</p> <p>City LAKE OSNEGO State OR Zip Code 97034</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00861 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 717.93</p>
<p>B. Full Name (Last, First, Middle Initial) CAPITOL HILL SUITES</p> <p>Mailing Address 200 C. STREET SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00861M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 717.93</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) BOB TIERMAN</p> <p>Mailing Address 205 EVERGREEN STREET</p> <p>City LAKE OSNEGO State OR Zip Code 97034</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00862 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 25.90</p>

SUBTOTAL of Disbursements This Page (optional) ▶

743.83

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) OYAMEL, WASHINGTON DC</p> <p>Mailing Address 401 7TH ST NW</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00862M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.90"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) BOB TIERMAN</p> <p>Mailing Address 205 EVERGREEN STREET</p> <p>City LAKE OSNEGO State OR Zip Code 97034</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00863</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="101.60"/></p>
<p>C. Full Name (Last, First, Middle Initial) THE CAPITAL GRILLE WASH, DC</p> <p>Mailing Address 601 PENNSYLVANIA AVE NW</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00863M</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="101.60"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="101.60"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MCCORMICK & SCHMICK, WDC	Transaction ID: 2009M04L21A00865M
	Mailing Address 162 K ST NW	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WASHINGTON State DC Zip Code 20006	Amount of Each Disbursement this Period 102.35
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) BOB TIERMAN	Transaction ID: 2009M04L21A00866
	Mailing Address 205 EVERGREEN STREET	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City LAKE OSNEGO State OR Zip Code 97034	Amount of Each Disbursement this Period 40.25
	Purpose of Disbursement MEALS,PARKING Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) NATIONAL AIRPORT GRILL, WDC	Transaction ID: 2009M04L21A00866M
	Mailing Address ONE AVIATION CIRCLE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period 40.25
	Purpose of Disbursement MEALS,PARKING Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	40.25
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1799 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) BOB TIERMAN	Transaction ID: 2009M04L21A00867 Date of Disbursement
	Mailing Address 205 EVERGREEN STREET	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City LAKE OSNEGO State OR Zip Code 97034	Amount of Each Disbursement this Period
	Purpose of Disbursement MILEAGE	<input type="text" value="33.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TINY JEWEL BOX	Transaction ID: 2009M04L21A00868 Date of Disbursement
	Mailing Address 1145 CONNECTICUT AVE 2ND FLOOR	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="597.49"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING	Transaction ID: 2009M04L21A00869 Date of Disbursement
	Mailing Address 5760 SUNNYSIDE AVE	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City BELTSVILLE State MD Zip Code 20705	Amount of Each Disbursement this Period
	Purpose of Disbursement PRINTING COST	<input type="text" value="68.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="698.49"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1800 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING</p> <p>Mailing Address 5760 SUNNYSIDE AVE</p> <p>City BELTSVILLE State MD Zip Code 20705</p> <p>Purpose of Disbursement PRINTING COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00870 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 490.00</p>
<p>B. Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING</p> <p>Mailing Address 5760 SUNNYSIDE AVE</p> <p>City BELTSVILLE State MD Zip Code 20705</p> <p>Purpose of Disbursement PRINTING COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00871 Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 688.60</p>
<p>C. Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING</p> <p>Mailing Address 5760 SUNNYSIDE AVE</p> <p>City BELTSVILLE State MD Zip Code 20705</p> <p>Purpose of Disbursement PRINTING COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00872 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 785.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1963.60

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1801 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING	Transaction ID: 2009M04L21A00873 Date of Disbursement																			
	Mailing Address 5760 SUNNYSIDE AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	0	9												
	City BELTSVILLE State MD Zip Code 20705	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINTING COST	<table border="1"><tr><td>1360.00</td></tr></table>	1360.00																		
1360.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING	Transaction ID: 2009M04L21A00874 Date of Disbursement																			
	Mailing Address 5760 SUNNYSIDE AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City BELTSVILLE State MD Zip Code 20705	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINTING COST	<table border="1"><tr><td>1385.00</td></tr></table>	1385.00																		
1385.00																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING	Transaction ID: 2009M04L21A00875 Date of Disbursement																			
	Mailing Address 5760 SUNNYSIDE AVE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	6		2	0	0	9												
	City BELTSVILLE State MD Zip Code 20705	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PRINTING COST	<table border="1"><tr><td>1721.40</td></tr></table>	1721.40																		
1721.40																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>4466.40</td></tr></table>	4466.40
4466.40		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING Mailing Address 5760 SUNNYSIDE AVE City BELTSVILLE State MD Zip Code 20705 Purpose of Disbursement PRINTING COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00876 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2220.00 Category/Type
B. Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING Mailing Address 5760 SUNNYSIDE AVE City BELTSVILLE State MD Zip Code 20705 Purpose of Disbursement PRINTING COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00877 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 2333.00 Category/Type
C. Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING Mailing Address 5760 SUNNYSIDE AVE City BELTSVILLE State MD Zip Code 20705 Purpose of Disbursement PRINTING COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00878 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2385.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

6938.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING	Transaction ID: 2009M04L21A00879
	Mailing Address 5760 SUNNYSIDE AVE	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City BELTSVILLE State MD Zip Code 20705	Amount of Each Disbursement this Period 2985.00
	Purpose of Disbursement PRINTING COST	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TODD ALLAN PRINTING	Transaction ID: 2009M04L21A00880
	Mailing Address 5760 SUNNYSIDE AVE	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City BELTSVILLE State MD Zip Code 20705	Amount of Each Disbursement this Period 3280.00
	Purpose of Disbursement PRINTING COST	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TRANSAMERICA LIFE INSURANCE	Transaction ID: 2009M04L21A00881
	Mailing Address 1150 SOUTH OLIVE STREET	Date of Disbursement MM / DD / YYYY 03 / 30 / 2009
	City LOS ANGELES State CA Zip Code 90015-2211	Amount of Each Disbursement this Period 4127.65
	Purpose of Disbursement 401K MATCH	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	10392.65
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TRANSAMERICA LIFE INSURANCE	Transaction ID: 2009M04L21A00882 Date of Disbursement
	Mailing Address 1150 SOUTH OLIVE STREET	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City LOS ANGELES State CA Zip Code 90015-2211	Amount of Each Disbursement this Period
	Purpose of Disbursement 401K MATCH	<input type="text" value="4367.34"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TRANSAMERICA LIFE INSURANCE	Transaction ID: 2009M04L21A00883 Date of Disbursement
	Mailing Address 1150 SOUTH OLIVE STREET	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City LOS ANGELES State CA Zip Code 90015-2211	Amount of Each Disbursement this Period
	Purpose of Disbursement EMPLOYEE DEDUCTION	<input type="text" value="9321.66"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TRANSAMERICA LIFE INSURANCE	Transaction ID: 2009M04L21A00884 Date of Disbursement
	Mailing Address 1150 SOUTH OLIVE STREET	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City LOS ANGELES State CA Zip Code 90015-2211	Amount of Each Disbursement this Period
	Purpose of Disbursement EMPLOYEE DEDUCTION	<input type="text" value="9701.66"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="23390.66"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) UPS, PHILADELPHIA PA <hr/> Mailing Address P O BOX 7247-0244 <hr/> City PHILADELPHIA State PA Zip Code 19170-0001 Purpose of Disbursement SHIPPING COST Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00888 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 278.39
B. Full Name (Last, First, Middle Initial) UPS, PHILADELPHIA PA <hr/> Mailing Address P O BOX 7247-0244 <hr/> City PHILADELPHIA State PA Zip Code 19170-0001 Purpose of Disbursement SHIPPING COST Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00889 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 495.82
C. Full Name (Last, First, Middle Initial) UPS, PHILADELPHIA PA <hr/> Mailing Address P O BOX 7247-0244 <hr/> City PHILADELPHIA State PA Zip Code 19170-0001 Purpose of Disbursement SHIPPING COST Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00890 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 2081.31

SUBTOTAL of Disbursements This Page (optional) ►

2855.52

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US MONITOR	Transaction ID: 2009M04L21A00891 Date of Disbursement
	Mailing Address 86 MAPLE AVE	<input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="2009"/>
	City NEW CITY State NY Zip Code 10956	Amount of Each Disbursement this Period
	Purpose of Disbursement MAILING COSTS	<input type="text" value="47.80"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) US MONITOR	Transaction ID: 2009M04L21A00892 Date of Disbursement
	Mailing Address 86 MAPLE AVE	<input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="2009"/>
	City NEW CITY State NY Zip Code 10956	Amount of Each Disbursement this Period
	Purpose of Disbursement MAILING COSTS	<input type="text" value="53.10"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) US MONITOR	Transaction ID: 2009M04L21A00893 Date of Disbursement
	Mailing Address 86 MAPLE AVE	<input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="2009"/>
	City NEW CITY State NY Zip Code 10956	Amount of Each Disbursement this Period
	Purpose of Disbursement MAILING COSTS	<input type="text" value="300.05"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="400.95"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) US POSTMASTER -WASHINGTON, DC</p> <p>Mailing Address 900 BRENTWOOD RD, NE</p> <p>City WASHINGTON State DC Zip Code 20066</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00894</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1130.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) US POSTMASTER -WASHINGTON, DC</p> <p>Mailing Address 900 BRENTWOOD RD, NE</p> <p>City WASHINGTON State DC Zip Code 20066</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00895</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) US POSTMASTER -WASHINGTON, DC</p> <p>Mailing Address 900 BRENTWOOD RD, NE</p> <p>City WASHINGTON State DC Zip Code 20066</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21A00896</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10000.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) US POSTMASTER -WASHINGTON, DC <hr/> Mailing Address 900 BRENTWOOD RD, NE <hr/> City WASHINGTON State DC Zip Code 20066 Purpose of Disbursement POSTAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00897 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 9	Amount of Each Disbursement this Period 20000.00
B.	Full Name (Last, First, Middle Initial) US POSTMASTER -WASHINGTON, DC <hr/> Mailing Address 900 BRENTWOOD RD, NE <hr/> City WASHINGTON State DC Zip Code 20066 Purpose of Disbursement POSTAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00898 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9	Amount of Each Disbursement this Period 20000.00
C.	Full Name (Last, First, Middle Initial) US POSTMASTER -WASHINGTON, DC <hr/> Mailing Address 900 BRENTWOOD RD, NE <hr/> City WASHINGTON State DC Zip Code 20066 Purpose of Disbursement POSTAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21A00899 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period 30000.00

SUBTOTAL of Disbursements This Page (optional)	70000.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) US POSTMASTER -WASHINGTON, DC</p> <p>Mailing Address 900 BRENTWOOD RD, NE</p> <p>City WASHINGTON State DC Zip Code 20066</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00900</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">40000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	3	/	2	0	0	9	40000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	3	/	2	0	0	9													
40000.00																						
<p>B. Full Name (Last, First, Middle Initial) US POSTMASTER -WASHINGTON, DC</p> <p>Mailing Address 900 BRENTWOOD RD, NE</p> <p>City WASHINGTON State DC Zip Code 20066</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00901</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">50000.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	3	0	/	2	0	0	9	50000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	3	0	/	2	0	0	9													
50000.00																						
<p>C. Full Name (Last, First, Middle Initial) USPS NATIONAL CUSTOMER SUPPORT</p> <p>Mailing Address CENTER 6060 PRIMACY PKWY SUITE 201</p> <p>City MEMPHIS State TN Zip Code 38188</p> <p>Purpose of Disbursement SUBSCRIPTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00902</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">350.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	350.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
350.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

90350.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TODD VAN ETTEN</p> <p>Mailing Address 1425 S EADS ST APT 309</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement CAR RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00903 Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 147.08</p>
<p>B. Full Name (Last, First, Middle Initial) DTG OPERATIONS, INC-BOK</p> <p>Mailing Address THRIFTY CAR RENTAL LOCKBOX 2241</p> <p>City TULSA State OK Zip Code 74182</p> <p>Purpose of Disbursement CAR RENTAL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00903M Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 147.08</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) TODD VAN ETTEN</p> <p>Mailing Address 1425 S EADS ST APT 309</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement FUEL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00904 Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 14.52</p>

SUBTOTAL of Disbursements This Page (optional)	161.60
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TODD VAN ETTEN	Transaction ID: 2009M04L21A00905 Date of Disbursement 03 / 26 / 2009	
	Mailing Address 1425 S EADS ST APT 309		
	City ARLINGTON State VA Zip Code 22202 Purpose of Disbursement INTERNET SERVICES Candidate Name	Amount of Each Disbursement this Period 24.95	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) NING, INC	Transaction ID: 2009M04L21A00905M Date of Disbursement 03 / 26 / 2009	
	Mailing Address 735 EMERSON ST		
	City PALO ALTO State CA Zip Code 94301 Purpose of Disbursement INTERNET SERVICES Candidate Name	Amount of Each Disbursement this Period 24.95	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) TODD VAN ETTEN	Transaction ID: 2009M04L21A00906 Date of Disbursement 03 / 26 / 2009	
	Mailing Address 1425 S EADS ST APT 309		
	City ARLINGTON State VA Zip Code 22202 Purpose of Disbursement LODGING Candidate Name	Amount of Each Disbursement this Period 316.14	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	341.09
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
GALT HOUSE HOTEL AND SUITES

Mailing Address 140 NORTH 4TH AVE

City LOUISVILLE State KY Zip Code 40202

Purpose of Disbursement
LODGING

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00906M
Date of Disbursement

03 / 26 / 2009

Amount of Each Disbursement this Period

316.14

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
TODD VAN ETTEN

Mailing Address 1425 S EADS ST APT 309

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00907
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

49.00

C.

Full Name (Last, First, Middle Initial)
TORTILLA COAST, WASHINGTON DC

Mailing Address 400 FIRST ST SE

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
MEALS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21A00907M
Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

49.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

49.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TODD VAN ETTEN	Transaction ID: 2009M04L21A00908 Date of Disbursement
	Mailing Address 1425 S EADS ST APT 309	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City ARLINGTON State VA Zip Code 22202	Amount of Each Disbursement this Period
	Purpose of Disbursement METROFARE	<input type="text" value="193.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WA METRO ATA	Transaction ID: 2009M04L21A00908M Date of Disbursement
	Mailing Address 600 5TH ST NW	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20001-2610	Amount of Each Disbursement this Period
	Purpose of Disbursement METROFARE	<input type="text" value="193.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) TODD VAN ETTEN	Transaction ID: 2009M04L21A00909 Date of Disbursement
	Mailing Address 1425 S EADS ST APT 309	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City ARLINGTON State VA Zip Code 22202	Amount of Each Disbursement this Period
	Purpose of Disbursement PER DIEM	<input type="text" value="120.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="313.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TODD VAN ETTEN</p> <p>Mailing Address 1425 S EADS ST APT 309</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00910 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 83.00</p>
<p>B. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00910M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 83.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P O BOX 660720</p> <p>City DALLAS State TX Zip Code 75266-0720</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00911 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 51.72</p>

SUBTOTAL of Disbursements This Page (optional) ▶

134.72

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P O BOX 660720</p> <p>City DALLAS State TX Zip Code 75266-0720</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00912</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 51.72</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P O BOX 660720</p> <p>City DALLAS State TX Zip Code 75266-0720</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00913</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 39.95</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VERIZON CABS</p> <p>Mailing Address P O BOX 4832</p> <p>City TRENTON State NJ Zip Code 08650-4832</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00914</p> <p>Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 825.64</p>

SUBTOTAL of Disbursements This Page (optional) ▶

917.31

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00915</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="37.69"/></p>
<p>B. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00916</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="73.61"/></p>
<p>C. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00917</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="79.66"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00918</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 81.03</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00919</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 82.26</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00920</p> <p>Date of Disbursement 03 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 83.33</p>

SUBTOTAL of Disbursements This Page (optional) ▶

246.62

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1819 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00921
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 83.33
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00922
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 83.33
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00923
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 83.33
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	249.99
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) VERIZON WIRELESS Mailing Address P O BOX 25505 City LEHIGH VALLEY State PA Zip Code 18002 Purpose of Disbursement PHONE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00924 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 83.33
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) VERIZON WIRELESS Mailing Address P O BOX 25505 City LEHIGH VALLEY State PA Zip Code 18002 Purpose of Disbursement PHONE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00925 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 89.81
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) VERIZON WIRELESS Mailing Address P O BOX 25505 City LEHIGH VALLEY State PA Zip Code 18002 Purpose of Disbursement PHONE CHARGES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A00926 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 9
	Amount of Each Disbursement this Period 93.87
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	267.01
TOTAL This Period (last page this line number only) ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00927</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="98.39"/></p>
<p>B. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00928</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="136.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00929</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="153.34"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

387.73

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1822 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00930</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="164.36"/></p>
<p>B. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00931</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="166.66"/></p>
<p>C. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00932</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="167.32"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

498.34

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1823 / 1945

<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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REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00933</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">167.53</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	9		167.53
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	9														
167.53																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00934</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">171.15</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	9		171.15
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	9														
171.15																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00935</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>9</td><td></td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">175.47</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	9		175.47
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	9														
175.47																						

SUBTOTAL of Disbursements This Page (optional) ▶

514.15

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)

PAGE 1824 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00936</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="196.93"/></p>
<p>B. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00937</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="198.43"/></p>
<p>C. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00938</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="227.68"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

623.04

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00939</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="230.55"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00940</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="309.96"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00941</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="311.56"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

852.07

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00942
	Mailing Address P O BOX 25505	Date of Disbursement 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 321.26
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00943
	Mailing Address P O BOX 25505	Date of Disbursement 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 334.19
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00944
	Mailing Address P O BOX 25505	Date of Disbursement 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 366.61
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	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) ▶

1022.06

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00945
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 372.54
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00946
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 403.64
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00947
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 440.46
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1216.64
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00948
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 468.43
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00949
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 469.87
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00950
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 513.61
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1451.91
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00951
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 633.48
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00952
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 702.15
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00953
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 895.82
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	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)	▶	2231.45
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00954</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="933.80"/></p>
<p>B. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00955</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1015.73"/></p>
<p>C. Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address P O BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00956</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1081.31"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00957
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period 1801.68
	Purpose of Disbursement PHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) VERIZON WIRELESS	Transaction ID: 2009M04L21A00958
	Mailing Address P O BOX 25505	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period -0.92
	Purpose of Disbursement PHONE CHARGES-VENDOR CREDIT	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00959
	Mailing Address PO BOX 371873	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 0.04
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

1800.80

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00960
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 0.17
	Purpose of Disbursement TELEPHONE CHARGES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00961
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 0.20
	Purpose of Disbursement TELEPHONE CHARGES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00962
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 0.29
	Purpose of Disbursement TELEPHONE CHARGES	Category/Type
	Candidate Name	
	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)	0.66
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00963 Date of Disbursement																			
	Mailing Address PO BOX 371873	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	9													
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TELEPHONE CHARGES	<table border="1"><tr><td>0.41</td></tr></table>	0.41																		
0.41																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00964 Date of Disbursement																			
	Mailing Address PO BOX 371873	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	9													
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TELEPHONE CHARGES	<table border="1"><tr><td>2.33</td></tr></table>	2.33																		
2.33																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00965 Date of Disbursement																			
	Mailing Address PO BOX 371873	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	9													
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TELEPHONE CHARGES	<table border="1"><tr><td>2.46</td></tr></table>	2.46																		
2.46																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>5.20</td></tr></table>	5.20
5.20		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00966</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 2.81</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00967</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 3.24</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00968</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 3.98</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10.03

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00969</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 4.62</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00970</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 4.93</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00971</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 5.44</p>

SUBTOTAL of Disbursements This Page (optional) ▶

14.99

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00972
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 5.98
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00973
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 6.41
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00974
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 7.00
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	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) ▶

19.39

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:
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00975 Date of Disbursement																			
	Mailing Address PO BOX 371873	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	9													
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TELEPHONE CHARGES	<table border="1"><tr><td>7.01</td></tr></table>	7.01																		
7.01																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00976 Date of Disbursement																			
	Mailing Address PO BOX 371873	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	9													
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TELEPHONE CHARGES	<table border="1"><tr><td>7.13</td></tr></table>	7.13																		
7.13																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00977 Date of Disbursement																			
	Mailing Address PO BOX 371873	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>9</td><td></td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	9													
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TELEPHONE CHARGES	<table border="1"><tr><td>7.71</td></tr></table>	7.71																		
7.71																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional) ▶

21.85

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00978</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 7.75</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00979</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 7.93</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00980</p> <p>Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 8.39</p>

SUBTOTAL of Disbursements This Page (optional) ▶

24.07

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00981</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">8.64</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	8.64
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
8.64																						
<p>B. Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00982</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">8.92</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	8.92
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
8.92																						
<p>C. Full Name (Last, First, Middle Initial) VERIZON BUSINESS</p> <p>Mailing Address PO BOX 371873</p> <p>City PITTSBURGH State PA Zip Code 15250-7873</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00983</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">10.18</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	10.18
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0	3	/	1	1	/	2	0	0	9													
10.18																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td style="font-size: 1.2em;">27.74</td> </tr> </table>	27.74
27.74		
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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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00984
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 10.64
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00985
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 11.04
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00986
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 12.51
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	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)	34.19
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00987
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 12.98
	Purpose of Disbursement TELEPHONE CHARGES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00988
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 13.62
	Purpose of Disbursement TELEPHONE CHARGES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00989
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 16.85
	Purpose of Disbursement TELEPHONE CHARGES	Category/Type
	Candidate Name	
	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)	43.45
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00990
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 21.85
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00991
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 24.58
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00992
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 24.98
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	71.41
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00993
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 25.89
	Purpose of Disbursement TELEPHONE CHARGES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00994
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 38.77
	Purpose of Disbursement TELEPHONE CHARGES	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00995
	Mailing Address PO BOX 371873	Date of Disbursement 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 79.50
	Purpose of Disbursement TELEPHONE CHARGES	Category/Type
	Candidate Name	
	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)	▶	144.16
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) VERIZON BUSINESS	Transaction ID: 2009M04L21A00996
	Mailing Address PO BOX 371873	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City PITTSBURGH State PA Zip Code 15250-7873	Amount of Each Disbursement this Period 2812.95
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: 2009M04L21A00997
	Mailing Address P O BOX 660720	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City DALLAS State TX Zip Code 75266-0720	Amount of Each Disbursement this Period 7.14
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: 2009M04L21A00998
	Mailing Address P O BOX 660720	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City DALLAS State TX Zip Code 75266	Amount of Each Disbursement this Period 6336.98
	Purpose of Disbursement TELEPHONE CHARGES	Category/ Type
	Candidate Name	
	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)	9157.07
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P O BOX 660720</p> <p>City DALLAS State TX Zip Code 75266-0720</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A00999</p> <p>Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 4090.48</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P O BOX 660720</p> <p>City DALLAS State TX Zip Code 75266</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01000</p> <p>Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 133.15</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address P O BOX 660720</p> <p>City DALLAS State TX Zip Code 75266</p> <p>Purpose of Disbursement TELEPHONE CHARGES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01001</p> <p>Date of Disbursement 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 125.86</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4349.49

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) GEOFF VERHOFF</p> <p>Mailing Address 4189 S. FOUR MILE RUN DR #404</p> <p>City ARLINGTON State VA Zip Code 22204</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01002 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 424.20</p>
<p>B. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 5620 UNIVERSITY PKWY</p> <p>City WINSTON SALEM State NC Zip Code 27105</p> <p>Purpose of Disbursement AIR FARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01002M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 424.20</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) GEOFF VERHOFF</p> <p>Mailing Address 4189 S. FOUR MILE RUN DR #404</p> <p>City ARLINGTON State VA Zip Code 22204</p> <p>Purpose of Disbursement TAXI'S</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01003 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 84.55</p>

SUBTOTAL of Disbursements This Page (optional)	508.75
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) GEOFF VERHOFF	Transaction ID: 2009M04L21A01004 Date of Disbursement 03 / 05 / 2009
	Mailing Address 4189 S. FOUR MILE RUN DR #404	Amount of Each Disbursement this Period 40.00
	City ARLINGTON State VA Zip Code 22204	
	Purpose of Disbursement TIPS	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) VERTIS COMMUNICATION	Transaction ID: 2009M04L21A01005 Date of Disbursement 03 / 05 / 2009
	Mailing Address ATTN: POSTAGE/ACCOUNTING DEPT 2901 BLACKBRIDGE ROAD	Amount of Each Disbursement this Period 73000.00
	City YORK State PA Zip Code 17402	
	Purpose of Disbursement POSTAGE	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) VIDEOFILES, INC	Transaction ID: 2009M04L21A01006 Date of Disbursement 03 / 05 / 2009
	Mailing Address 1011 ARLINGTON BLVD SUITE T-4	Amount of Each Disbursement this Period 997.50
	City ARLINGTON State VA Zip Code 22209	
	Purpose of Disbursement VIDEO PRODUCTIONS	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	74037.50
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) WACHOVIA BANK <hr/> Mailing Address COMMERCIAL BILLING DEPT. PO BOX 60403 <hr/> City CHARLOTTE State NC Zip Code 28260-0403 <hr/> Purpose of Disbursement VOID ISSUED IN ERROR-12/18/08 Candidate Name Category/ Type <hr/> 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:	Transaction ID: 2009M04L21A01007 Date of Disbursement 03 / 05 / 2009 <hr/> Amount of Each Disbursement this Period -97500.00
B.	Full Name (Last, First, Middle Initial) WACHOVIA BANK <hr/> Mailing Address COMMERCIAL BILLING DEPT. PO BOX 60403 <hr/> City CHARLOTTE State NC Zip Code 28260-0403 <hr/> Purpose of Disbursement VOID ISSUED IN ERROR-12/18/08 Candidate Name Category/ Type <hr/> 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:	Transaction ID: 2009M04L21A01008 Date of Disbursement 03 / 05 / 2009 <hr/> Amount of Each Disbursement this Period -52500.00
C.	Full Name (Last, First, Middle Initial) BRAD WALP <hr/> Mailing Address 6940 FAIRFAX DRIVE STE 404 <hr/> City ARLINGTON State VA Zip Code 22213-1035 <hr/> Purpose of Disbursement INTERNET SERVICES Candidate Name Category/ Type <hr/> 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:	Transaction ID: 2009M04L21A01009 Date of Disbursement 03 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 45.95

SUBTOTAL of Disbursements This Page (optional) ▶

-149954.05

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) COMCAST</p> <p>Mailing Address P O BOX 3005</p> <p>City SOUTHEASTERN State PA Zip Code 19398</p> <p>Purpose of Disbursement INTERNET SERVICES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01009M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">45.95</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	45.95
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
45.95																						
<p>B. Full Name (Last, First, Middle Initial) WASHINGTON COURIER</p> <p>Mailing Address 5520 CHEROKEE AVE SUITE 120</p> <p>City ALEXANDRIA State VA Zip Code 22312</p> <p>Purpose of Disbursement DELIVERY COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01010</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">23.63</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	6	/	2	0	0	9	23.63
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	2	6	/	2	0	0	9													
23.63																						
<p>C. Full Name (Last, First, Middle Initial) WASHINGTON GAS</p> <p>Mailing Address PO BOX 9001036</p> <p>City LOUISVILLE State KY Zip Code 40290</p> <p>Purpose of Disbursement UTILITIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01011</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">811.74</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	0	9	811.74
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	0	9													
811.74																						

SUBTOTAL of Disbursements This Page (optional) ▶

835.37

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)

PAGE 1850 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) WASHINGTON GAS	Transaction ID: 2009M04L21A01012
	Mailing Address P O BOX 830036	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City LOUISVILLE State KY Zip Code 40290-1036	Amount of Each Disbursement this Period 698.11
	Purpose of Disbursement UTILITIES	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) WELBOURNE	Transaction ID: 2009M04L21A01013
	Mailing Address 5951 ARBOR ST	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City HYATTSVILLE State MD Zip Code 20781	Amount of Each Disbursement this Period 2202.98
	Purpose of Disbursement ELECTRICAL MAINTENANCE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) WELBOURNE	Transaction ID: 2009M04L21A01014
	Mailing Address 5951 ARBOR ST	Date of Disbursement MM / DD / YYYY 03 / 26 / 2009
	City HYATTSVILLE State MD Zip Code 20781	Amount of Each Disbursement this Period 1330.35
	Purpose of Disbursement ELECTRICAL SERVICES	Category/ Type
	Candidate Name	
	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)	▶	4231.44
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) WELBOURNE	Transaction ID: 2009M04L21A01015 Date of Disbursement
	Mailing Address 5951 ARBOR ST	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City HYATTSVILLE State MD Zip Code 20781	Amount of Each Disbursement this Period
	Purpose of Disbursement ELECTRICAL SERVICES	<input type="text" value="1882.18"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WELBOURNE	Transaction ID: 2009M04L21A01016 Date of Disbursement
	Mailing Address 5951 ARBOR ST	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City HYATTSVILLE State MD Zip Code 20781	Amount of Each Disbursement this Period
	Purpose of Disbursement ELECTRICAL SERVICES	<input type="text" value="1927.37"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WESTERN PEST SERVICES	Transaction ID: 2009M04L21A01017 Date of Disbursement
	Mailing Address 202 PERRY PARKWAY SUITE 2	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City GAITHERSBURG State MD Zip Code 20877	Amount of Each Disbursement this Period
	Purpose of Disbursement PEST CONTROL	<input type="text" value="121.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3931.05"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) WILKINS ENTERPRISE LLC	Transaction ID: 2009M04L21A01018
	Mailing Address 11201 GLISSADE DRIVE	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period 2268.00
	Purpose of Disbursement BUILDING MAINTENANCE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) WILKINS ENTERPRISE LLC	Transaction ID: 2009M04L21A01019
	Mailing Address 11201 GLISSADE DRIVE	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period 4447.00
	Purpose of Disbursement BUILDING MAINTENANCE	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) WINDOWS CATERING	Transaction ID: 2009M04L21A01020
	Mailing Address 5724 GENERAL WASHINGTON DRIVE	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City ALEXANDRIA State VA Zip Code 22312	Amount of Each Disbursement this Period 399.94
	Purpose of Disbursement CATERING COST	Category/Type
	Candidate Name	
	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)	7114.94
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

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) WINDOWS CATERING	Transaction ID: 2009M04L21A01021
	Mailing Address 5724 GENERAL WASHINGTON DRIVE	Date of Disbursement 03 / 26 / 2009
	City ALEXANDRIA State VA Zip Code 22312	Amount of Each Disbursement this Period 399.94
	Purpose of Disbursement CATERING COST	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) WINDOWS CATERING	Transaction ID: 2009M04L21A01022
	Mailing Address 5724 GENERAL WASHINGTON DRIVE	Date of Disbursement 03 / 26 / 2009
	City ALEXANDRIA State VA Zip Code 22312	Amount of Each Disbursement this Period 399.94
	Purpose of Disbursement CATERING COST	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) W NEW YORK TIMES SQUARE	Transaction ID: 2009M04L21A01023
	Mailing Address 1567 BROADWAY, LEVEL 5	Date of Disbursement 03 / 24 / 2009
	City NEW YORK State NY Zip Code 10036	Amount of Each Disbursement this Period 5670.22
	Purpose of Disbursement LODGING/VENUE RENTAL	Category/Type
	Candidate Name	
	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)	6470.10
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH</p> <p>Mailing Address 2208 40TH PL NW APT 2</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement BAGGAGE COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01024</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">10.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	10.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
10.00																						
<p>B. Full Name (Last, First, Middle Initial) US AIRWAYS</p> <p>Mailing Address 5620 UNIVERSITY PKWY</p> <p>City WINSTON SALEM State NC Zip Code 27105</p> <p>Purpose of Disbursement BAGGAGE COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01024M</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">10.00</td> </tr> </table> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	10.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
10.00																						
<p>C. Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH</p> <p>Mailing Address 2208 40TH PL NW APT 2</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement BAGGAGE COST</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01025</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">10.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0	9	10.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	5		2	0	0	9													
10.00																						

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<table border="1"> <tr> <td style="font-weight: bold;">20.00</td> </tr> </table>	20.00
20.00		
<p>TOTAL This Period (last page this line number only)</p>	<table border="1"> <tr> <td style="height: 20px;"></td> </tr> </table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 5620 UNIVERSITY PKWY City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement BAGGAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A01025M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 10.00 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH Mailing Address 2208 40TH PL NW APT 2 City WASHINGTON State DC Zip Code 20007 Purpose of Disbursement BAGGAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A01026 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 10.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) US AIRWAYS Mailing Address 5620 UNIVERSITY PKWY City WINSTON SALEM State NC Zip Code 27105 Purpose of Disbursement BAGGAGE COST Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: 2009M04L21A01026M Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 10.00 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	10.00
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1856 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH</p> <p>Mailing Address 2208 40TH PL NW APT 2</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01027 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 353.08</p>
<p>B. Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH</p> <p>Mailing Address ONE SOUTH COUNTY ROAD</p> <p>City PALM BEACH State FL Zip Code 33480</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01027M Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 353.08</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH</p> <p>Mailing Address 2208 40TH PL NW APT 2</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21A01028 Date of Disbursement 03 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 353.09</p>

SUBTOTAL of Disbursements This Page (optional) ▶

706.17

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH	Transaction ID: 2009M04L21A01028M Date of Disbursement
	Mailing Address ONE SOUTH COUNTY ROAD	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period
	Purpose of Disbursement LODGING	<input type="text" value="353.09"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: 2009M04L21A01029 Date of Disbursement
	Mailing Address 2208 40TH PL NW APT 2	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement LODGING	<input type="text" value="353.09"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH	Transaction ID: 2009M04L21A01029M Date of Disbursement
	Mailing Address ONE SOUTH COUNTY ROAD	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period
	Purpose of Disbursement LODGING	<input type="text" value="353.09"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="353.09"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: 2009M04L21A01030 Date of Disbursement
	Mailing Address 2208 40TH PL NW APT 2	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement MEALS	<input type="text" value="2.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CALIFORNIA TORTILLA, WDC	Transaction ID: 2009M04L21A01030M Date of Disbursement
	Mailing Address 1 AVIATION CIRCLE	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period
	Purpose of Disbursement MEALS	<input type="text" value="2.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: 2009M04L21A01031 Date of Disbursement
	Mailing Address 2208 40TH PL NW APT 2	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period
	Purpose of Disbursement MEALS	<input type="text" value="2.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5.10"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1859 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CALIFORNIA TORTILLA, WDC	Transaction ID: 2009M04L21A01031M
	Mailing Address 1 AVIATION CIRCLE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period 2.55
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: 2009M04L21A01032
	Mailing Address 2208 40TH PL NW APT 2	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period 2.55
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) CALIFORNIA TORTILLA, WDC	Transaction ID: 2009M04L21A01032M
	Mailing Address 1 AVIATION CIRCLE	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WASHINGTON State DC Zip Code 20001	Amount of Each Disbursement this Period 2.55
	Purpose of Disbursement MEALS Candidate Name	[MEMO ITEM]
	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)	2.55
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1860 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: 2009M04L21A01033
	Mailing Address 2208 40TH PL NW APT 2	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period 9.90
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH	Transaction ID: 2009M04L21A01033M
	Mailing Address ONE SOUTH COUNTY ROAD	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period 9.90
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: 2009M04L21A01034
	Mailing Address 2208 40TH PL NW APT 2	Date of Disbursement MM / DD / YYYY 03 / 05 / 2009
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period 9.91
	Purpose of Disbursement MEALS Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	19.81
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1861 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH	Transaction ID: 2009M04L21A01034M Date of Disbursement																			
	Mailing Address ONE SOUTH COUNTY ROAD	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>9.91</td></tr></table>	9.91																		
9.91																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) CAITLIN WOHLFARTH	Transaction ID: 2009M04L21A01035 Date of Disbursement																			
	Mailing Address 2208 40TH PL NW APT 2	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20007	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>9.91</td></tr></table>	9.91																		
9.91																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) THE BREAKERS PALM BEACH	Transaction ID: 2009M04L21A01035M Date of Disbursement																			
	Mailing Address ONE SOUTH COUNTY ROAD	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City PALM BEACH State FL Zip Code 33480	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MEALS	<table border="1"><tr><td>9.91</td></tr></table>	9.91																		
9.91																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM]																			
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>9.91</td></tr></table>	9.91
9.91		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1862 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) XEROX CORPORATION <hr/> Mailing Address P O BOX 827598 <hr/> City PHILADELPHIA State PA Zip Code 19182 <hr/> Purpose of Disbursement PHOTOCOPIER Candidate Name Category/Type <hr/> 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:	Transaction ID: 2009M04L21A01036 Date of Disbursement 03 / 05 / 2009 <hr/> Amount of Each Disbursement this Period 10424.26
B.	Full Name (Last, First, Middle Initial) REPUBLICAN NATIONAL COMMITTEE <hr/> Mailing Address 310 FIRST STREET SE <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement INKIND-TRANSFER ASSETS Candidate Name Category/Type <hr/> 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:	Transaction ID: 2009M04L21A01037 Date of Disbursement 03 / 17 / 2009 <hr/> Amount of Each Disbursement this Period -281.25 OFFSET IN-KIND LINE 22
C.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS-BANK CHARGES <hr/> Mailing Address P O BOX 114 <hr/> City NEWARK State NJ Zip Code 07101-0114 <hr/> Purpose of Disbursement CREDIT CARD FEES Candidate Name Category/Type <hr/> 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:	Transaction ID: 2009M04L21BCC00001 Date of Disbursement 03 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 5658.10

SUBTOTAL of Disbursements This Page (optional) ▶

15801.11

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1863 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) HOCKADAY DONATELLI CAMP.</p> <p>Mailing Address 228 S WASHINGTON ST SUITE 240</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement CREDIT CARD FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BCC00002</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 19681.55</p>
<p>B. Full Name (Last, First, Middle Initial) NOVA INFORMATION SYSTEMS INC</p> <p>Mailing Address 7300 CHAPMAN HIGHWAY</p> <p>City KNOXVILLE State TN Zip Code 37920</p> <p>Purpose of Disbursement CREDIT CARD FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BCC00003</p> <p>Date of Disbursement 03 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 975.19</p>
<p>C. Full Name (Last, First, Middle Initial) NOVA INFORMATION SYSTEMS INC</p> <p>Mailing Address 7300 CHAPMAN HIGHWAY</p> <p>City KNOXVILLE State TN Zip Code 37920</p> <p>Purpose of Disbursement CREDIT CARD FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BCC00004</p> <p>Date of Disbursement 03 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 14.95</p>

SUBTOTAL of Disbursements This Page (optional)	20671.69
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) NOVA INFORMATION SYSTEMS INC</p> <p>Mailing Address 7300 CHAPMAN HIGHWAY</p> <p>City KNOXVILLE State TN Zip Code 37920</p> <p>Purpose of Disbursement CREDIT CARD FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BCC00005</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6970.88"/></p>
<p>B. Full Name (Last, First, Middle Initial) NOVA INFORMATION SYSTEMS INC</p> <p>Mailing Address 7300 CHAPMAN HIGHWAY</p> <p>City KNOXVILLE State TN Zip Code 37920</p> <p>Purpose of Disbursement CREDIT CARD FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BCC00006</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7257.37"/></p>
<p>C. Full Name (Last, First, Middle Initial) GEORGE A ALAFEGUIUS</p> <p>Mailing Address 9445 TOBIN CIRCLE</p> <p>City POTOMAC State MD Zip Code 20854</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00001</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1580.60"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1865 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) GEORGE A ALAFOGINIS</p> <p>Mailing Address 9445 TOBIN CIRCLE</p> <p>City POTOMAC State MD Zip Code 20854</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00002</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1580.61</p>
<p>B. Full Name (Last, First, Middle Initial) DELITA ALEXANDER</p> <p>Mailing Address 7554 ABBINGTON DR</p> <p>City OXON HILL State MD Zip Code 20745</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00003</p> <p>Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 937.60</p>
<p>C. Full Name (Last, First, Middle Initial) DELITA ALEXANDER</p> <p>Mailing Address 7554 ABBINGTON DR</p> <p>City OXON HILL State MD Zip Code 20745</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00004</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1176.86</p>

SUBTOTAL of Disbursements This Page (optional)	3695.07
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1866 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ERIC R ANDERSON</p> <p>Mailing Address 6547 GRANGE LANE</p> <p>City ALEXANDRIA State VA Zip Code 22315</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00005 Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 2632.41</p>
<p>B. Full Name (Last, First, Middle Initial) ERIC R ANDERSON</p> <p>Mailing Address 6547 GRANGE LANE</p> <p>City ALEXANDRIA State VA Zip Code 22315</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00006 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 2619.99</p>
<p>C. Full Name (Last, First, Middle Initial) JAY C BANNING</p> <p>Mailing Address 2127 CALIFORNIA ST N</p> <p>City WASHINGTON State DC Zip Code 20008</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00007 Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 5683.65</p>

SUBTOTAL of Disbursements This Page (optional) ▶

10936.05

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) JAY C BANNING <hr/> Mailing Address 2127 CALIFORNIA ST N <hr/> City WASHINGTON State DC Zip Code 20008 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00008 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009
	Amount of Each Disbursement this Period 5648.19
B. Full Name (Last, First, Middle Initial) MELISSA A BARND <hr/> Mailing Address 328 D STREET SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00009 Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2009
	Amount of Each Disbursement this Period 1236.47
C. Full Name (Last, First, Middle Initial) MELISSA A BARND <hr/> Mailing Address 328 D STREET SE <hr/> City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00010 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009
	Amount of Each Disbursement this Period 3234.11

SUBTOTAL of Disbursements This Page (optional)	▶	10118.77
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) IAN S BARTELS <hr/> Mailing Address 1200 N WEITCH ST <hr/> City ARLINGTON State VA Zip Code 22201 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00011 Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2009
	Amount of Each Disbursement this Period 1116.66
B. Full Name (Last, First, Middle Initial) IAN S BARTELS <hr/> Mailing Address 1200 N WEITCH ST <hr/> City ARLINGTON State VA Zip Code 22201 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00012 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009
	Amount of Each Disbursement this Period 1116.65
C. Full Name (Last, First, Middle Initial) CHAD M BARTH <hr/> Mailing Address 1943 COLUMBIA PIKE <hr/> City ARLINGTON State VA Zip Code 22204 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00013 Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2009
	Amount of Each Disbursement this Period 2506.06

SUBTOTAL of Disbursements This Page (optional) ▶

4739.37

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CHAD M BARTH</p> <p>Mailing Address 1943 COLUMBIA PIKE</p> <p>City ARLINGTON State VA Zip Code 22204</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00014</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2506.05"/></p>
<p>B. Full Name (Last, First, Middle Initial) LAUREN BATTEY</p> <p>Mailing Address 642 EAST CAPITOL ST</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00015</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1082.99"/></p>
<p>C. Full Name (Last, First, Middle Initial) LAUREN BATTEY</p> <p>Mailing Address 165 FORD ROAD</p> <p>City CARMEL VALLEY State CA Zip Code 93924</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00016</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2401.26"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PARISH M BRADEN</p> <p>Mailing Address 700 7TH STREET SW</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00017</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1644.67"/></p>
<p>B. Full Name (Last, First, Middle Initial) PARISH M BRADEN</p> <p>Mailing Address 700 7TH STREET SW</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00018</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1644.69"/></p>
<p>C. Full Name (Last, First, Middle Initial) JOHN G BROWN JR</p> <p>Mailing Address 8655 BENT ARROW CT</p> <p>City SPRINGFIELD State VA Zip Code 22153</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00019</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1273.13"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4562.49"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JOHN G BROWN JR</p> <p>Mailing Address 8655 BENT ARROW CT</p> <p>City SPRINGFIELD State VA Zip Code 22153</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00020 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1273.15</p>
<p>B. Full Name (Last, First, Middle Initial) CHRISTOPHER BURCHFIELD</p> <p>Mailing Address 816 18TH STREET SO</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00021 Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1413.13</p>
<p>C. Full Name (Last, First, Middle Initial) CHRISTOPHER BURCHFIELD</p> <p>Mailing Address 816 18TH STREET SO</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00022 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1413.12</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4099.40

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) GENTRY T COLLINS <hr/> Mailing Address 728 NE 41ST COURT <hr/> City ANKENY State IA Zip Code 50021 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00023 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009
	Amount of Each Disbursement this Period 3705.01
B. Full Name (Last, First, Middle Initial) ROGER ALEXANDER CONANT <hr/> Mailing Address 1813 BILTMORE ST NW <hr/> City WASHINGTON State DC Zip Code 20009 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00024 Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2009
	Amount of Each Disbursement this Period 2644.11
C. Full Name (Last, First, Middle Initial) ROGER ALEXANDER CONANT <hr/> Mailing Address 1813 BILTMORE ST NW <hr/> City WASHINGTON State DC Zip Code 20009 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00025 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009
	Amount of Each Disbursement this Period 3532.48

SUBTOTAL of Disbursements This Page (optional)	9881.60
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BELINDA COOK</p> <p>Mailing Address 113 REMINGTON CT</p> <p>City CENTERVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00026</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3567.34"/></p>
<p>B. Full Name (Last, First, Middle Initial) LEE A COOK</p> <p>Mailing Address 113 REMINGTON COURT</p> <p>City CENTREVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00027</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1625.88"/></p>
<p>C. Full Name (Last, First, Middle Initial) BELINDA COOK</p> <p>Mailing Address 113 REMINGTON CT</p> <p>City CENTERVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00028</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3567.32"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) LEE A COOK</p> <p>Mailing Address 113 REMINGTON COURT</p> <p>City CENTREVILLE State MD Zip Code 21617</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00029</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1625.89"/></p>
<p>B. Full Name (Last, First, Middle Initial) PHILIP P COPPAGE</p> <p>Mailing Address 415 N JERSEY AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00030</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1878.64"/></p>
<p>C. Full Name (Last, First, Middle Initial) PHILIP P COPPAGE</p> <p>Mailing Address 415 N JERSEY AVE SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00031</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1870.39"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) KERI A COTTERMAN</p> <p>Mailing Address 223 12TH STREET NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00032</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1690.01"/></p>
<p>B. Full Name (Last, First, Middle Initial) KERI A COTTERMAN</p> <p>Mailing Address 223 12TH STREET NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00033</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1690.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) JEAN FRANCOIS HANS COUTARD</p> <p>Mailing Address 1611 PARK ROAD NW</p> <p>City WASHINGTON State DC Zip Code 20010</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00034</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1185.61"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4565.62"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1876 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JEAN FRANCOIS HANS COUTARD</p> <p>Mailing Address 1611 PARK ROAD NW</p> <p>City WASHINGTON State DC Zip Code 20010</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00035</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1181.59"/></p>
<p>B. Full Name (Last, First, Middle Initial) WILLIAM F CROZER</p> <p>Mailing Address 1301 M STREET NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00036</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1157.31"/></p>
<p>C. Full Name (Last, First, Middle Initial) WILLIAM F CROZER</p> <p>Mailing Address 1301 M STREET NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00037</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2129.38"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4468.28"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN T CUMMINS	Transaction ID: 2009M04L21BPA00038
	Mailing Address 105 QUAY STREET	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1134.38
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOHN T CUMMINS	Transaction ID: 2009M04L21BPA00039
	Mailing Address 105 QUAY STREET	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 1223.96
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NANCY HOPE DEHLINGER	Transaction ID: 2009M04L21BPA00040
	Mailing Address 9004 GOLDEN PASS	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City LAUREL State MD Zip Code 20708	Amount of Each Disbursement this Period 1563.05
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3921.39
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) NANCY HOPE DEHLINGER Mailing Address 9004 GOLDEN PASS City LAUREL State MD Zip Code 20708 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00041 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1555.30
B. Full Name (Last, First, Middle Initial) TONY C DENNIS Mailing Address 8107 PICARD LANE City UPPER MARLBORO State MD Zip Code 20774 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00042 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 931.24
C. Full Name (Last, First, Middle Initial) TONY C DENNIS Mailing Address 8107 PICARD LANE City UPPER MARLBORO State MD Zip Code 20774 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00043 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 931.24

SUBTOTAL of Disbursements This Page (optional) ▶

3417.78

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JESSICA D. ENNIS</p> <p>Mailing Address 116 N CAROLINA AVE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00044</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2803.91"/></p>
<p>B. Full Name (Last, First, Middle Initial) JESSICA D. ENNIS</p> <p>Mailing Address 116 N CAROLINA AVE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00045</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2803.91"/></p>
<p>C. Full Name (Last, First, Middle Initial) DIRK E EYMAN</p> <p>Mailing Address 20301 THUNDERHEAD WY</p> <p>City GERMANTOWN State MD Zip Code 20874</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00046</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3148.20"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="8756.02"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DIRK E EYMAN</p> <p>Mailing Address 20301 THUNDERHEAD WY</p> <p>City GERMANTOWN State MD Zip Code 20874</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00047</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3148.19"/></p>
<p>B. Full Name (Last, First, Middle Initial) JULIE M FLEMING</p> <p>Mailing Address 6719 BOSTWICK DRIVE</p> <p>City SPRINGFIELD State VA Zip Code 22151</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00048</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1198.41"/></p>
<p>C. Full Name (Last, First, Middle Initial) JULIE M FLEMING</p> <p>Mailing Address 6719 BOSTWICK DRIVE</p> <p>City SPRINGFIELD State VA Zip Code 22151</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00049</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1965.55"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="6312.15"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1881 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ERICA A FLINT Mailing Address 607 MASS AVE NE City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00050 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 478.78
B. Full Name (Last, First, Middle Initial) MICHAEL T GILDING Mailing Address 1723 GOSNELL ROAD City VIENNA State VA Zip Code 22182 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00051 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1587.05
C. Full Name (Last, First, Middle Initial) MICHAEL T GILDING Mailing Address 1723 GOSNELL ROAD City VIENNA State VA Zip Code 22182 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00052 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1587.06

SUBTOTAL of Disbursements This Page (optional) ▶

3652.89

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMY M GRANGEIA</p> <p>Mailing Address 1425 P STREET NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00053</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1699.71"/></p>
<p>B. Full Name (Last, First, Middle Initial) AMY M GRANGEIA</p> <p>Mailing Address 1425 P STREET NW</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00054</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1699.71"/></p>
<p>C. Full Name (Last, First, Middle Initial) PHYLLIS M GREENE</p> <p>Mailing Address 1728 ALBERT DRIVE</p> <p>City MITCHELLVILLE State MD Zip Code 20721</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00055</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1018.80"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4418.22"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1883 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PHYLLIS M GREENE</p> <p>Mailing Address 1728 ALBERT DRIVE</p> <p>City MITCHELLVILLE State MD Zip Code 20721</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00056</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1018.80"/></p>
<p>B. Full Name (Last, First, Middle Initial) SUZANNA M HEALY</p> <p>Mailing Address 1801 CRYSTAL DRIVE</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00057</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="711.13"/></p>
<p>C. Full Name (Last, First, Middle Initial) ANNETTE R HENRY</p> <p>Mailing Address 3928 AMES ST NE</p> <p>City WASHINGTON State DC Zip Code 20019</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00058</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2483.36"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4213.29"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ANNETTE R HENRY	Transaction ID: 2009M04L21BPA00059
	Mailing Address 3928 AMES ST NE	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City WASHINGTON State DC Zip Code 20019	Amount of Each Disbursement this Period 2481.84
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) NANCY DUDIAK HIBBS	Transaction ID: 2009M04L21BPA00060
	Mailing Address 1005 NEW DAWN LANE	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City ODENTON State MD Zip Code 21113	Amount of Each Disbursement this Period 2721.85
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) NANCY DUDIAK HIBBS	Transaction ID: 2009M04L21BPA00061
	Mailing Address 1005 NEW DAWN LANE	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City ODENTON State MD Zip Code 21113	Amount of Each Disbursement this Period 2708.31
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ► 7912.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1885 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	<p>Full Name (Last, First, Middle Initial) KELLY ELIZABETH HOLDWAY</p> <p>Mailing Address 13003 EAST ABINGDON</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00062</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1970.09"/></p>
B.	<p>Full Name (Last, First, Middle Initial) KELLY ELIZABETH HOLDWAY</p> <p>Mailing Address 1303 E. ABINGDON DR.</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00063</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2134.34"/></p>
C.	<p>Full Name (Last, First, Middle Initial) PATRICIA E HUYCK</p> <p>Mailing Address 2108 GRAYSTONE COURT</p> <p>City FREDERICK State MD Zip Code 21702</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00064</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2850.64"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6955.07"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) PATRICIA E HUYCK</p> <p>Mailing Address 2108 GRAYSTONE COURT</p> <p>City FREDERICK State MD Zip Code 21702</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00065</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2831.14"/></p>
<p>B. Full Name (Last, First, Middle Initial) TERESSA JACKSON</p> <p>Mailing Address 3907 SOUTHERN AVE</p> <p>City SUITLAND State MD Zip Code 20746</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00066</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1733.14"/></p>
<p>C. Full Name (Last, First, Middle Initial) TERESSA JACKSON</p> <p>Mailing Address 3907 SOUTHERN AVE</p> <p>City SUITLAND State MD Zip Code 20746</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00067</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2269.83"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) HEATHER O JEFFREYS</p> <p>Mailing Address 2721 SO ADAMS STREET</p> <p>City ARLINGTON State VA Zip Code 22206</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00068</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1080.80"/></p>
<p>B. Full Name (Last, First, Middle Initial) HEATHER O JEFFREYS</p> <p>Mailing Address 2721 SO ADAMS STREET</p> <p>City ARLINGTON State VA Zip Code 22206</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00069</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1077.74"/></p>
<p>C. Full Name (Last, First, Middle Initial) MONICA LOUISE JOHNSON</p> <p>Mailing Address 129 R ST., NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00070</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="629.30"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1888 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CRYSTAL RENEE JOHNSON</p> <p>Mailing Address P.O. BOX 471747</p> <p>City FORESTVILLE State MD Zip Code 20753</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00071</p> <p>Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1446.36</p>
<p>B. Full Name (Last, First, Middle Initial) JEFFREY GORDON JOHNSON</p> <p>Mailing Address 1409 HAMLIN ST NE</p> <p>City WASHINGTON State DC Zip Code 20017</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00072</p> <p>Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1661.76</p>
<p>C. Full Name (Last, First, Middle Initial) MONICA LOUISE JOHNSON</p> <p>Mailing Address 129 R ST., NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00073</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 800.54</p>

SUBTOTAL of Disbursements This Page (optional) ►

3908.66

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)

PAGE 1889 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) CRYSTAL RENEE JOHNSON	Transaction ID: 2009M04L21BPA00074
	Mailing Address P.O. BOX 471747	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City FORESTVILLE State MD Zip Code 20753	Amount of Each Disbursement this Period 1439.72
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JEFFREY GORDON JOHNSON	Transaction ID: 2009M04L21BPA00075
	Mailing Address 1409 HAMLIN ST NE	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City WASHINGTON State DC Zip Code 20017	Amount of Each Disbursement this Period 1656.84
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) ROBERT EUGENE JONES III	Transaction ID: 2009M04L21BPA00076
	Mailing Address 509 E STREET NE	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 1147.31
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4243.87
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)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) ROBERT EUGENE JONES III Mailing Address 509 E STREET NE City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00077 Date of Disbursement 03 / 31 / 2009 Amount of Each Disbursement this Period 1147.31
B.	Full Name (Last, First, Middle Initial) JEREMY L KENNEY Mailing Address 15 3RD ST., NE City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00078 Date of Disbursement 03 / 13 / 2009 Amount of Each Disbursement this Period 2640.88
C.	Full Name (Last, First, Middle Initial) JEREMY L KENNEY Mailing Address 15 3RD ST., NE City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00079 Date of Disbursement 03 / 31 / 2009 Amount of Each Disbursement this Period 2627.42

SUBTOTAL of Disbursements This Page (optional) ▶

6415.61

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1891 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) TIMOTHY E KILLEEN	Transaction ID: 2009M04L21BPA00080
	Mailing Address 1600 S EADS	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City ARLINGTON State VA Zip Code 22202	Amount of Each Disbursement this Period 1370.18
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) TIMOTHY E KILLEEN	Transaction ID: 2009M04L21BPA00081
	Mailing Address 1600 S EADS	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City ARLINGTON State VA Zip Code 22202	Amount of Each Disbursement this Period 1370.17
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CYRUS KROHN	Transaction ID: 2009M04L21BPA00082
	Mailing Address 205 WILKES STREET	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 5359.96
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8100.31
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JANET M LARIMER</p> <p>Mailing Address 3630 CURTIS DRIVE</p> <p>City TETON VILLAGE State WY Zip Code 83025</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00083</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">4292.96</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	3	/	2	0	0	9	4292.96
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	3	/	2	0	0	9													
4292.96																						
<p>B. Full Name (Last, First, Middle Initial) JANET M LARIMER</p> <p>Mailing Address 3630 CURTIS DRIVE</p> <p>City TETON VILLAGE State WY Zip Code 83025</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00084</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">4292.94</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	3	1	/	2	0	0	9	4292.94
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	3	1	/	2	0	0	9													
4292.94																						
<p>C. Full Name (Last, First, Middle Initial) MARTINE LAVEIST</p> <p>Mailing Address 9002 MANCHESTER RD</p> <p>City SILVER SPRING State MD Zip Code 20901</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00085</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">1131.27</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	3	/	2	0	0	9	1131.27
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0	3	/	1	3	/	2	0	0	9													
1131.27																						

SUBTOTAL of Disbursements This Page (optional)	9717.17
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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MARTINE LAVEIST <hr/> Mailing Address 9002 MANCHESTER RD <hr/> City SILVER SPRING State MD Zip Code 20901 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00086 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009
	Amount of Each Disbursement this Period 1126.01
B. Full Name (Last, First, Middle Initial) DEBORAH P SMITH LE HARDY <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00087 Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2009
	Amount of Each Disbursement this Period 3670.96
C. Full Name (Last, First, Middle Initial) DEBORAH P SMITH LE HARDY <hr/> Mailing Address 2440 N EDGEWOOD ST <hr/> City ARLINGTON State VA Zip Code 22207 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00088 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009
	Amount of Each Disbursement this Period 3651.73

SUBTOTAL of Disbursements This Page (optional) ▶

8448.70

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DIANA KAY LEO</p> <p>Mailing Address 1146 EAST 1900 NORTH</p> <p>City NORTH LOGAN State UT Zip Code 87341</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00089</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1437.76"/></p>
<p>B. Full Name (Last, First, Middle Initial) DIANA KAY LEO</p> <p>Mailing Address 1146 EAST 1900 NORTH</p> <p>City NORTH LOGAN State UT Zip Code 87341</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00090</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1437.76"/></p>
<p>C. Full Name (Last, First, Middle Initial) TERRELL JAMES LEWIS</p> <p>Mailing Address 18419 BARNEY DRIVE</p> <p>City ACCOKEEK State MD Zip Code 20607</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00091</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="766.67"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

3642.19

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1895 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TERRELL JAMES LEWIS</p> <p>Mailing Address 18419 BARNEY DRIVE</p> <p>City ACCOKEEK State MD Zip Code 20607</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00092</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 766.66</p>
<p>B. Full Name (Last, First, Middle Initial) EDWARD K LIPPMAN</p> <p>Mailing Address 9802 THUNDERHILL CT</p> <p>City GREAT FALLS State VA Zip Code 22066</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00093</p> <p>Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 776.13</p>
<p>C. Full Name (Last, First, Middle Initial) EDWARD K LIPPMAN</p> <p>Mailing Address 9802 THUNDERHILL CT</p> <p>City GREAT FALLS State VA Zip Code 22066</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00094</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 776.13</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2318.92

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1896 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NAHSHON A LITTMAN	Transaction ID: 2009M04L21BPA00095
	Mailing Address 6617 SEAT PLESENT DR	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City CAPITOL HEIGHTS State MD Zip Code 20743	Amount of Each Disbursement this Period 1109.86
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NAHSHON A LITTMAN	Transaction ID: 2009M04L21BPA00096
	Mailing Address 6617 SEAT PLESENT DR	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City CAPITOL HEIGHTS State MD Zip Code 20743	Amount of Each Disbursement this Period 1109.85
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) AMBER L LYONS	Transaction ID: 2009M04L21BPA00097
	Mailing Address 520 JOHN CARLYLE ST	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period 2223.80
	Purpose of Disbursement PAYROLL Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4443.51
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AMBER L LYONS</p> <p>Mailing Address 520 JOHN CARLYLE ST</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00098</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2223.82"/></p>
<p>B. Full Name (Last, First, Middle Initial) VICTORIA J. MAGUIRE</p> <p>Mailing Address 620 9TH STREET SW</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00099</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1921.58"/></p>
<p>C. Full Name (Last, First, Middle Initial) CATHERINE R MARCUCCI</p> <p>Mailing Address 2623 13TH STREET NW</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00100</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="979.04"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CATHERINE R MARCUCCI</p> <p>Mailing Address 2623 13TH STREET NW</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00101</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 979.04</p>
<p>B. Full Name (Last, First, Middle Initial) DOUGLASS V MAYER</p> <p>Mailing Address 1753 REMINGTON COURT</p> <p>City CROFTON State MD Zip Code 21114</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00102</p> <p>Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1583.88</p>
<p>C. Full Name (Last, First, Middle Initial) DOUGLASS V MAYER</p> <p>Mailing Address 1753 REMINGTON COURT</p> <p>City CROFTON State MD Zip Code 21114</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00103</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1583.89</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4146.81

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MERRILL E MC CARTY</p> <p>Mailing Address 1336 22ND STREET NW</p> <p>City WASHINGTON State DC Zip Code 20037</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00104</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1187.05</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	9	1187.05
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	3		2	0	0	9													
1187.05																						
<p>B. Full Name (Last, First, Middle Initial) MERRILL E MC CARTY</p> <p>Mailing Address 1336 22ND STREET NW</p> <p>City WASHINGTON State DC Zip Code 20037</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00105</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1187.06</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	9	1187.06
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	1		2	0	0	9													
1187.06																						
<p>C. Full Name (Last, First, Middle Initial) MARTIN CHRISTOPHER MC CONAHAY</p> <p>Mailing Address 1254 HALF STREET NW</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00106</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">1347.33</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	3		2	0	0	9	1347.33
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		1	3		2	0	0	9													
1347.33																						

SUBTOTAL of Disbursements This Page (optional)	3721.44
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1900 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MARTIN CHRISTOPHER MC CONAHAY</p> <p>Mailing Address 1254 HALF STREET NW</p> <p>City WASHINGTON State DC Zip Code 20024</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00107</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1343.11"/></p>
<p>B. Full Name (Last, First, Middle Initial) ANN F MC ENIRY</p> <p>Mailing Address 1111 N RANDOLPH ST</p> <p>City ARLINGTON State VA Zip Code 22201</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00108</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1244.46"/></p>
<p>C. Full Name (Last, First, Middle Initial) ANN F MC ENIRY</p> <p>Mailing Address 1111 N RANDOLPH ST</p> <p>City ARLINGTON State VA Zip Code 22201</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00109</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1244.48"/></p>

SUBTOTAL of Disbursements This Page (optional) ►

3832.05

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1901 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) KENNETH K MC KAY IV</p> <p>Mailing Address 15 BATES AVENUE</p> <p>City NORTH KINGSTOWN State RI Zip Code 02852</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00110</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6389.69"/></p>
<p>B. Full Name (Last, First, Middle Initial) ALLISON M MEYERS</p> <p>Mailing Address 3020 DENT PLACE NW</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00111</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1980.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) ALLISON M MEYERS</p> <p>Mailing Address 3020 DENT PLACE NW</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00112</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1433.53"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="9803.22"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MAURICE M MIDDLETON</p> <p>Mailing Address 1526 CONSTITUTION</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00113</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="381.25"/></p>
<p>B. Full Name (Last, First, Middle Initial) MAURICE M MIDDLETON</p> <p>Mailing Address 1526 CONSTITUTION</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00114</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="520.49"/></p>
<p>C. Full Name (Last, First, Middle Initial) TERRY SCOTT MORRIS</p> <p>Mailing Address 3731 JENIFER ST NW</p> <p>City WASHINGTON State DC Zip Code 20015</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00115</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3515.65"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4417.39"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1903 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JOAN NEGRONI</p> <p>Mailing Address 2003 ANNIES WAY</p> <p>City VIENNA State VA Zip Code 22182</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00116</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="899.63"/></p>
<p>B. Full Name (Last, First, Middle Initial) JOAN NEGRONI</p> <p>Mailing Address 2003 ANNIES WAY</p> <p>City VIENNA State VA Zip Code 22182</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00117</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="816.22"/></p>
<p>C. Full Name (Last, First, Middle Initial) MICHAEL H. NOLLER</p> <p>Mailing Address 310 E.MASON AVE.</p> <p>City ALEXANDRIA State VA Zip Code 22301</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00118</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1209.06"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1904 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MICHAEL H. NOLLER</p> <p>Mailing Address 310 E.MASON AVE.</p> <p>City ALEXANDRIA State VA Zip Code 22301</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00119</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1209.05"/></p>
<p>B. Full Name (Last, First, Middle Initial) MICHAEL P OMEGNA</p> <p>Mailing Address 5415 CONN AVE NW</p> <p>City WASHINGTON State DC Zip Code 20015</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00120</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1022.54"/></p>
<p>C. Full Name (Last, First, Middle Initial) MICHAEL P OMEGNA</p> <p>Mailing Address 5415 CONN AVE NW</p> <p>City WASHINGTON State DC Zip Code 20015</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00121</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1022.55"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3254.14"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1905 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) FRANCES M. PARKER</p> <p>Mailing Address 14128 GRAND PRE RD.</p> <p>City SILVER SPRING State MD Zip Code 20906</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00122</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1223.91"/></p>
<p>B. Full Name (Last, First, Middle Initial) FRANCES M. PARKER</p> <p>Mailing Address 14128 GRAND PRE RD.</p> <p>City SILVER SPRING State MD Zip Code 20906</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00123</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1219.01"/></p>
<p>C. Full Name (Last, First, Middle Initial) BRIAN C PATRICK</p> <p>Mailing Address 2782 SIKES CT</p> <p>City FALLS CHURCH State VA Zip Code 22043</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00124</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1272.65"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3715.57"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1906 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) BRIAN C PATRICK</p> <p>Mailing Address 1534 16TH RD NORTH</p> <p>City ARLINGTON State VA Zip Code 22209</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00125 Date of Disbursement: 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1272.65</p>
<p>B. Full Name (Last, First, Middle Initial) ELIZABETH W PEARCE</p> <p>Mailing Address 3401 RUSSELL ROAD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00126 Date of Disbursement: 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1646.78</p>
<p>C. Full Name (Last, First, Middle Initial) ELIZABETH W PEARCE</p> <p>Mailing Address 3401 RUSSELL ROAD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00127 Date of Disbursement: 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 3568.14</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6487.57

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DANIEL C PERKINS</p> <p>Mailing Address 403 ROLAND ST SW</p> <p>City VIENNA State VA Zip Code 22180</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00128</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3216.80</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	3	/	2	0	0	9	3216.80
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	3	/	2	0	0	9													
3216.80																						
<p>B. Full Name (Last, First, Middle Initial) DANIEL C PERKINS</p> <p>Mailing Address 403 ROLAND ST SW</p> <p>City VIENNA State VA Zip Code 22180</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00129</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3205.95</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	3	1	/	2	0	0	9	3205.95
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	3	1	/	2	0	0	9													
3205.95																						
<p>C. Full Name (Last, First, Middle Initial) TREVOR K PERSON</p> <p>Mailing Address 42 ALSACE COURT</p> <p>City LITTLE ROCK State AR Zip Code 72223</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00130</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">3156.94</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	3	/	2	0	0	9	3156.94
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	3	/	2	0	0	9													
3156.94																						

SUBTOTAL of Disbursements This Page (optional) ▶

9579.69

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TREVOR K PERSON</p> <p>Mailing Address 42 ALSACE COURT</p> <p>City LITTLE ROCK State AR Zip Code 72223</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00131</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3146.87"/></p>
<p>B. Full Name (Last, First, Middle Initial) ENRICO PICCININI</p> <p>Mailing Address 6031 HEATHERWOOD DR</p> <p>City ALEXANDRIA State VA Zip Code 22310</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00132</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1473.83"/></p>
<p>C. Full Name (Last, First, Middle Initial) ENRICO PICCININI</p> <p>Mailing Address 6031 HEATHERWOOD DR</p> <p>City ALEXANDRIA State VA Zip Code 22310</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00133</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2148.53"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ANDREW F POLESOUSKY</p> <p>Mailing Address 640 BRAHLER LANE</p> <p>City MAUMEE State OH Zip Code 43537</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00134</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1225.12"/></p>
<p>B. Full Name (Last, First, Middle Initial) ANDREW F POLESOUSKY</p> <p>Mailing Address 640 BRAHLER LANE</p> <p>City MAUMEE State OH Zip Code 43537</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00135</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1225.13"/></p>
<p>C. Full Name (Last, First, Middle Initial) GENE R PREZOCKI</p> <p>Mailing Address 10808 ANTIGUA TERR</p> <p>City ROCKVILLE State MD Zip Code 20852</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00136</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1726.30"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) GENE R PREZOCKI</p> <p>Mailing Address 10808 ANTIGUA TERR</p> <p>City ROCKVILLE State MD Zip Code 20852</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00137</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1718.18"/></p>
<p>B. Full Name (Last, First, Middle Initial) DEEPAK RAMNATH</p> <p>Mailing Address 3000 WASHINGTON BLVD</p> <p>City ARLINGTON State VA Zip Code 22201</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00138</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1336.15"/></p>
<p>C. Full Name (Last, First, Middle Initial) DEEPAK RAMNATH</p> <p>Mailing Address 3000 WASHINGTON BLVD</p> <p>City ARLINGTON State VA Zip Code 22201</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00139</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1336.15"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4390.48"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) RACHEL C REA	Transaction ID: 2009M04L21BPA00140
	Mailing Address 101 E MT ROYAL AVE	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City BALTIMORE State MD Zip Code 21202	Amount of Each Disbursement this Period 1118.25
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RACHEL C REA	Transaction ID: 2009M04L21BPA00141
	Mailing Address 101 E MT ROYAL AVE	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	City BALTIMORE State MD Zip Code 21202	Amount of Each Disbursement this Period 1118.25
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SHANNON F REEVES	Transaction ID: 2009M04L21BPA00142
	Mailing Address 605 CLARIDEN RANCH	Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	City SOUTHLAKE State TX Zip Code 76092	Amount of Each Disbursement this Period 2300.83
	Purpose of Disbursement PAYROLL	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	4537.33
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SHANNON F REEVES</p> <p>Mailing Address 605 CLARIDEN RANCH</p> <p>City SOUTHLAKE State TX Zip Code 76092</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00143</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2295.02"/></p>
<p>B. Full Name (Last, First, Middle Initial) TASHA E. REID</p> <p>Mailing Address 4803 SOUTH DAKOTA</p> <p>City WASHINGTON State DC Zip Code 20017</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00144</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1209.43"/></p>
<p>C. Full Name (Last, First, Middle Initial) TASHA E. REID</p> <p>Mailing Address 4803 SOUTH DAKOTA</p> <p>City WASHINGTON State DC Zip Code 20017</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00145</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1206.39"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4710.84"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) THOMAS J ROBERTS</p> <p>Mailing Address 7815A HARROWGATE CIR</p> <p>City SPRINGFIELD State VA Zip Code 22152</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00146 Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1994.82</p>
<p>B. Full Name (Last, First, Middle Initial) THOMAS J ROBERTS</p> <p>Mailing Address 7815A HARROWGATE CIR</p> <p>City SPRINGFIELD State VA Zip Code 22152</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00147 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1994.82</p>
<p>C. Full Name (Last, First, Middle Initial) DAVID A ROMAN</p> <p>Mailing Address 15023 OAK CREST CT</p> <p>City MONTCLAIR State VA Zip Code 22025</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00148 Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1136.34</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5125.98

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DAVID A ROMAN</p> <p>Mailing Address 15023 OAK CREST CT</p> <p>City MONTCLAIR State VA Zip Code 22025</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00149</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1136.34"/></p>
<p>B. Full Name (Last, First, Middle Initial) SARA C ROSE</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00150</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1951.07"/></p>
<p>C. Full Name (Last, First, Middle Initial) SARA C ROSE</p> <p>Mailing Address 500 MONTICELLO BLVD</p> <p>City ALEXANDRIA State VA Zip Code 22305</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00151</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1951.08"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JAMES M ROWLEY</p> <p>Mailing Address 1812 NORTH HOWARD ST</p> <p>City ALEXANDRIA State VA Zip Code 22304</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00152</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3623.75"/></p>
<p>B. Full Name (Last, First, Middle Initial) JAMES M ROWLEY</p> <p>Mailing Address 1812 NORTH HOWARD ST</p> <p>City ALEXANDRIA State VA Zip Code 22304</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00153</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3607.74"/></p>
<p>C. Full Name (Last, First, Middle Initial) PATRICK V ROYAL</p> <p>Mailing Address 3511 DAVENPORT ST NW</p> <p>City WASHINGTON State DC Zip Code 20008</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00154</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2188.07"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) PATRICK V ROYAL <hr/> Mailing Address 3511 DAVENPORT ST NW <hr/> City WASHINGTON State DC Zip Code 20008 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00155 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009
	Amount of Each Disbursement this Period 2188.07
B. Full Name (Last, First, Middle Initial) ANGELA R SAILOR <hr/> Mailing Address 14321 DOWDEN DOWN <hr/> City HAYMARKET State VA Zip Code 20169 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00156 Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2009
	Amount of Each Disbursement this Period 4079.98
C. Full Name (Last, First, Middle Initial) ANGELA R SAILOR <hr/> Mailing Address 14321 DOWDEN DOWN <hr/> City HAYMARKET State VA Zip Code 20169 Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00157 Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2009
	Amount of Each Disbursement this Period 4477.61

SUBTOTAL of Disbursements This Page (optional) ▶

10745.66

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) GERI B SANDERS</p> <p>Mailing Address 5905 TAYLOR ROAD</p> <p>City RIVERDALE State MD Zip Code 20737</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00158 Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1624.72</p>
<p>B. Full Name (Last, First, Middle Initial) GERI B SANDERS</p> <p>Mailing Address 5905 TAYLOR ROAD</p> <p>City RIVERDALE State MD Zip Code 20737</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00159 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1617.75</p>
<p>C. Full Name (Last, First, Middle Initial) GORDON K SCHOEPFLE</p> <p>Mailing Address 6520 CHESTERFIELD</p> <p>City MC LEAN State VA Zip Code 22101</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00160 Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 2594.15</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5836.62

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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)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) GORDON K SCHOEPFLE <hr/> Mailing Address 6520 CHESTERFIELD <hr/> City MC LEAN State VA Zip Code 22101 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00161 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2585.06
B. Full Name (Last, First, Middle Initial) MICHAEL CHRISTOPHER SCOTT <hr/> Mailing Address 2111 JEFFERSON DAVIS <hr/> City ARLINGTON State VA Zip Code 22202 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00162 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1944.31
C. Full Name (Last, First, Middle Initial) MICHAEL CHRISTOPHER SCOTT <hr/> Mailing Address 2111 JEFFERSON DAVIS <hr/> City ARLINGTON State VA Zip Code 22202 <hr/> Purpose of Disbursement PAYROLL Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00163 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1944.31

SUBTOTAL of Disbursements This Page (optional) ▶

6473.68

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) RITA CATHARINE SECOR</p> <p>Mailing Address 5970 TRUMAN MANOR PL</p> <p>City WALDORF State MD Zip Code 20601</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00164 Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 3077.57</p>
<p>B. Full Name (Last, First, Middle Initial) RITA CATHARINE SECOR</p> <p>Mailing Address 5970 TRUMAN MANOR PL</p> <p>City WALDORF State MD Zip Code 20601</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00165 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 3064.51</p>
<p>C. Full Name (Last, First, Middle Initial) JENNIFER H SHEEHAN</p> <p>Mailing Address 1341 CORCORAN ST NW</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00166 Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 2423.77</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8565.85

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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JENNIFER H SHEEHAN</p> <p>Mailing Address 1341 CORCORAN ST NW</p> <p>City WASHINGTON State DC Zip Code 20009</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00167</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2411.02"/></p>
<p>B. Full Name (Last, First, Middle Initial) ANTOINE D SHORT</p> <p>Mailing Address 13003 JACKSON DRIVE</p> <p>City FT WASHINGTON State MD Zip Code 20744</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00168</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="958.99"/></p>
<p>C. Full Name (Last, First, Middle Initial) ANTOINE D SHORT</p> <p>Mailing Address 13003 JACKSON DRIVE</p> <p>City FT WASHINGTON State MD Zip Code 20744</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00169</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="958.97"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="4328.98"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) HEATHER L SIDWELL</p> <p>Mailing Address 3731 JENIFER ST NW</p> <p>City WASHINGTON State DC Zip Code 20015</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00170</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2770.64"/></p>
<p>B. Full Name (Last, First, Middle Initial) HEATHER L SIDWELL</p> <p>Mailing Address 3535 SOUTH BALL ST</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00171</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2787.31"/></p>
<p>C. Full Name (Last, First, Middle Initial) MICHAEL S STEELE</p> <p>Mailing Address 16606 PLEASANT</p> <p>City UPPER MARLBORO State MD Zip Code 20774</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 2009M04L21BPA00172</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4990.18"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MICHAEL S STEELE</p> <p>Mailing Address 16606 PLEASANT</p> <p>City UPPER MARLBORO State MD Zip Code 20774</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00173</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4990.18"/></p>
<p>B. Full Name (Last, First, Middle Initial) WILLIAM L STEINER</p> <p>Mailing Address 610 N WEST STREET</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00174</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4198.43"/></p>
<p>C. Full Name (Last, First, Middle Initial) WILLIAM L STEINER</p> <p>Mailing Address 610 N WEST STREET</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00175</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4198.43"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="13387.04"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DAVID D THOMAS</p> <p>Mailing Address 19600 AQUASCO RD</p> <p>City AQUASCO State MD Zip Code 20608</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00176</p> <p>Date of Disbursement MM / DD / YYYY 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 2162.93</p>
<p>B. Full Name (Last, First, Middle Initial) MARY E THOMAS</p> <p>Mailing Address 811 CENTRAL HILLS LN</p> <p>City LANDOVER State MD Zip Code 20785</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00177</p> <p>Date of Disbursement MM / DD / YYYY 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 445.42</p>
<p>C. Full Name (Last, First, Middle Initial) DAVID D THOMAS</p> <p>Mailing Address 19600 AQUASCO RD</p> <p>City AQUASCO State MD Zip Code 20608</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00178</p> <p>Date of Disbursement MM / DD / YYYY 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 2162.93</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4771.28

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1924 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MARY E THOMAS Mailing Address 811 CENTRAL HILLS LN City LANDOVER State MD Zip Code 20785 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00179 Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	Amount of Each Disbursement this Period 528.11
B. Full Name (Last, First, Middle Initial) JONATHAN DAVID THOMPSON Mailing Address 1000 NEW JERSEY AVE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00180 Date of Disbursement MM / DD / YYYY 03 / 13 / 2009
	Amount of Each Disbursement this Period 958.71
C. Full Name (Last, First, Middle Initial) JONATHAN DAVID THOMPSON Mailing Address 1000 NEW JERSEY AVE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement PAYROLL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L21BPA00181 Date of Disbursement MM / DD / YYYY 03 / 31 / 2009
	Amount of Each Disbursement this Period 958.71

SUBTOTAL of Disbursements This Page (optional)	2445.53
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 1925 / 1945

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) TODD S VAN ETTEN</p> <p>Mailing Address 1425 S. EADS ST</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00182 Date of Disbursement: 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1406.76</p>
<p>B. Full Name (Last, First, Middle Initial) TODD S VAN ETTEN</p> <p>Mailing Address 1425 S. EADS ST</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00183 Date of Disbursement: 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 1406.77</p>
<p>C. Full Name (Last, First, Middle Initial) JACQUELINE M VANDERSLICE</p> <p>Mailing Address 105 QUAY STREET</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00184 Date of Disbursement: 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1134.35</p>

SUBTOTAL of Disbursements This Page (optional)	3947.88
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)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) JACQUELINE M VANDERSLICE</p> <p>Mailing Address 105 QUAY STREET</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00185</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1228.94"/></p>
<p>B. Full Name (Last, First, Middle Initial) BRADLEY J WALP</p> <p>Mailing Address 6940 FAIRFAX DRIVE</p> <p>City ARLINGTON State VA Zip Code 22213</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00186</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1768.06"/></p>
<p>C. Full Name (Last, First, Middle Initial) BRADLEY J WALP</p> <p>Mailing Address 6940 FAIRFAX DRIVE</p> <p>City ARLINGTON State VA Zip Code 22213</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00187</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1760.61"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) LORI ANN WEBERG</p> <p>Mailing Address 320 23RD STREET S</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00188</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="966.65"/></p>
<p>B. Full Name (Last, First, Middle Initial) LORI ANN WEBERG</p> <p>Mailing Address 320 23RD STREET S</p> <p>City ARLINGTON State VA Zip Code 22202</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00189</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1247.16"/></p>
<p>C. Full Name (Last, First, Middle Initial) LINDSEY ANN WILLIAMS DRATH</p> <p>Mailing Address 4201 CATHEDRAL AVE</p> <p>City WASHINGTON State DC Zip Code 20016</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00190</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4297.26"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="6511.07"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) CAITLIN E WOHLFARTH</p> <p>Mailing Address 2208 40TH PLACE NW</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00191</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1154.81"/></p>
<p>B. Full Name (Last, First, Middle Initial) CAITLIN E WOHLFARTH</p> <p>Mailing Address 2208 40TH PLACE NW</p> <p>City WASHINGTON State DC Zip Code 20007</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00192</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1154.81"/></p>
<p>C. Full Name (Last, First, Middle Initial) DENNIS R WRIGHT</p> <p>Mailing Address 8603 BATTAILLES CT</p> <p>City ANNANDALE State VA Zip Code 22003</p> <p>Purpose of Disbursement PAYROLL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L21BPA00193</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2793.57"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="5103.19"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1929 / 1945

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DENNIS R WRIGHT

Mailing Address 8603 BATAILLES CT

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L21BPA00194

Date of Disbursement

/ /

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)

PAGE 1930 / 1945

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L22TR00001 Date of Disbursement																			
	Mailing Address 7300 HUDSON BLVD SUITE 270	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period																			
	Purpose of Disbursement IN-KIND PHONING	<table border="1"><tr><td>67.99</td></tr></table>	67.99																		
67.99																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) MAIN REPUBLICAN PARTY	Transaction ID: 2009M04L22TR00001M Date of Disbursement																			
	Mailing Address 76 SILVER STREET	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City WATERVILLE State ME Zip Code 04901	Amount of Each Disbursement this Period																			
	Purpose of Disbursement IN-KIND PHONING	<table border="1"><tr><td>67.99</td></tr></table>	67.99																		
67.99																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L22TR00002 Date of Disbursement																			
	Mailing Address 7300 HUDSON BLVD SUITE 270	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period																			
	Purpose of Disbursement IN-KIND PHONING	<table border="1"><tr><td>15.24</td></tr></table>	15.24																		
15.24																					
	Candidate Name	Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>83.23</td></tr></table>	83.23
83.23		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

**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 checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NEVADA REP ST CTRL COMM	Transaction ID: 2009M04L22TR00002M
	Mailing Address 8625 WEST SAHARA AVE	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City LAS VEGAS State NV Zip Code 89117	Amount of Each Disbursement this Period 15.24
	Purpose of Disbursement IN-KIND PHONING	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) FLS CONNECT, LLC	Transaction ID: 2009M04L22TR00003
	Mailing Address 7300 HUDSON BLVD SUITE 270	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City SAINT PAUL State MN Zip Code 55128	Amount of Each Disbursement this Period 658.88
	Purpose of Disbursement IN-KIND PHONING	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) WASHINGTON REPUBLICAN PARTY	Transaction ID: 2009M04L22TR00003M
	Mailing Address 2840 NORTHUP WAY, SUITE 140	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City B ELLEVUE State WA Zip Code 98004	Amount of Each Disbursement this Period 658.88
	Purpose of Disbursement IN-KIND PHONING	[MEMO ITEM]
	Candidate Name	
	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)	658.88
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 type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NEW YORK REP ST COMM	Transaction ID: 2009M04L22TR00004 Date of Disbursement
	Mailing Address 315 STATE STREET	<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City ALBANY State NY Zip Code 12210	Amount of Each Disbursement this Period
	Purpose of Disbursement TRANSFER	<input type="text" value="25000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) NEW YORK REP ST COMM	Transaction ID: 2009M04L22TR00005 Date of Disbursement
	Mailing Address 315 STATE STREET	<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City ALBANY State NY Zip Code 12210	Amount of Each Disbursement this Period
	Purpose of Disbursement TRANSFER	<input type="text" value="9000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NEW YORK REP ST COMM	Transaction ID: 2009M04L22TR00006 Date of Disbursement
	Mailing Address 315 STATE STREET	<input type="text" value="03"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City ALBANY State NY Zip Code 12210	Amount of Each Disbursement this Period
	Purpose of Disbursement TRANSFER	<input type="text" value="100000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="134000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1933 / 1945

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NEW YORK REP ST COMM	Transaction ID: 2009M04L22TR00007 Date of Disbursement MM / DD / YYYY 03 / 16 / 2009
	Mailing Address 315 STATE STREET	Amount of Each Disbursement this Period 100000.00
	City ALBANY State NY Zip Code 12210	
	Purpose of Disbursement TRANSFER	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) NRSC	Transaction ID: 2009M04L22TR00008 Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 425 SECOND STREET NE	Amount of Each Disbursement this Period 1000000.00
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement TRANSFER	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) NRCC	Transaction ID: 2009M04L22TR00009 Date of Disbursement MM / DD / YYYY 03 / 06 / 2009
	Mailing Address 320 FIRST STREET SE	Amount of Each Disbursement this Period 1000000.00
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement TRANSFER	Category/ Type
	Candidate Name	
	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)	▶	2100000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1934 / 1945

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) NEW YORK REP ST COMM Mailing Address 315 STATE STREET City ALBANY State NY Zip Code 12210 Purpose of Disbursement VOID-ISSUED IN ERROR 3/20/2009 Candidate Name Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 2009M04L22TR00010 Date of Disbursement 03 / 25 / 2009 Amount of Each Disbursement this Period -25000.00
B.	Full Name (Last, First, Middle Initial) REPUBLICAN STAT CMTE OF DE Mailing Address 3301 LANCASTER PIKE SUITE 4B City WILMINGTON State DE Zip Code 19805 Purpose of Disbursement OFF SET INKIND LINE 21 Candidate Name Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 2009M04L22TR00011 Date of Disbursement 03 / 17 / 2009 Amount of Each Disbursement this Period 281.25
C.	Full Name (Last, First, Middle Initial) SOUTH DAKOTA REPUBLICAN PARTY Mailing Address 42482 GOLFVIEW DRIVE City BRITTON State SD Zip Code 57430 Purpose of Disbursement REFUND Candidate Name Category/ Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 2009M04L22TR00012 Date of Disbursement 03 / 30 / 2009 Amount of Each Disbursement this Period 80.00

SUBTOTAL of Disbursements This Page (optional) ▶

-24638.75

TOTAL This Period (last page this line number only) ▶

2210103.36

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
TEDISCO FOR CONGRESS INC

Transaction ID: 2009M04L23FC00001

Date of Disbursement

Mailing Address 1707 RT 9

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	0	9

City State Zip Code
CLIFTON PARK NY 12065

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement

Category/
Type

Candidate Name
JAMES N TEDISCO

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: NY District: 20

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

TOTAL This Period (last page this line number only) ►

2000.00

SCHEDULE F (FEC Form 3X)
ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

PAGE 1937 / 1945
 FOR LINE 25 OF FORM 3X

NAME OF COMMITTEE (In Full) REPUBLICAN NATIONAL COMMITTEE	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee REPUBLICAN NATIONAL COMMITTEE
If YES, name the designating committee: REPUBLICAN PARTY OF LOUISIANA	Mailing Address 310 1ST ST SE City: WASHINGTON State: DC ZIP Code: 20003

Full Name (Last, First, Middle Initial) of Each Payee SPECIAL SERVICES CONSULTING LLC		Purpose of Expenditure COOR- PRINTING	
Mailing Address P O BOX 10340		Category/Type	
City NEW ORLEANS	State LA		
Name of Federal Candidate Supported JOSEPH CAO	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> Presidential	Date M M / D D / Y Y Y Y 03 / 03 / 2009	
Aggregate General Election Expenditure for this Candidate ▶		Amount	228.05
		Transaction ID: 2009M04L25CE00002	

SUBTOTAL of Expenditures This Page (optional) ▶	228.05
TOTAL This Period (last page this line number only) ▶	228.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1938 / 1945

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) SUSAN FLYNN <hr/> Mailing Address 3541 CORTE ESPERANZA <hr/> City CARLSBAD State CA Zip Code 92009 <hr/> Purpose of Disbursement REFUND Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L28ARI00001 Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 300.00
B.	Full Name (Last, First, Middle Initial) MS MARIA A LITTLETON <hr/> Mailing Address 36 PROSPECT STREET <hr/> City BELMONT State MA Zip Code 02478 <hr/> Purpose of Disbursement REFUND Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L28ARI00002 Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 35.00
C.	Full Name (Last, First, Middle Initial) MR WILLARD A MCGRAW <hr/> Mailing Address 6305 BARDU AVENUE <hr/> City SPRINGFIELD State VA Zip Code 22152 <hr/> Purpose of Disbursement REFUND Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L28ARI00003 Date of Disbursement M M / D D / Y Y Y Y 03 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 100.00

SUBTOTAL of Disbursements This Page (optional) ▶

435.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1939 / 1945

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) MR JAMES B DRIVER</p> <p>Mailing Address 1290 SHILOH ROAD</p> <p>City LAFAYETTE State TN Zip Code 37083</p> <p>Purpose of Disbursement REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L28ARI00004</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) MR WALT PALMIERI</p> <p>Mailing Address 6764 SCHUYLER ROAD</p> <p>City EAST SYRACUSE State NY Zip Code 13057</p> <p>Purpose of Disbursement REFUND</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L28ARI00005</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) MR OLIVER T CARR</p> <p>Mailing Address 6037 RIDGE DRIVE</p> <p>City BETHESDA State MD Zip Code 20816</p> <p>Purpose of Disbursement REFUND-OVER FEDERAL LIMIT 2008</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 2009M04L28ARI00006</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5210.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="5710.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1940 / 1945

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MR JOHN D CURTIS <hr/> Mailing Address 570 MANOR ROAD <hr/> City MAITLAND State FL Zip Code 32751 <hr/> Purpose of Disbursement REFUND-OVER FEDERAL LIMIT 2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L28ARI00007 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 23800.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) MR ARMAND C DELLOVADE <hr/> Mailing Address 108 CAVASINA DRIVE <hr/> City CANONSBURG State PA Zip Code 15317 <hr/> Purpose of Disbursement REFUND-OVER FEDERAL LIMIT 2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L28ARI00008 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 3000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) MR J THOMAS DODSON <hr/> Mailing Address 75 PONTE VEDRA BLVD <hr/> City PONTE VEDRA BEACH State FL Zip Code 32082 <hr/> Purpose of Disbursement REFUND-OVER FEDERAL LIMIT 2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L28ARI00009 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

27800.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A. Full Name (Last, First, Middle Initial) MR JAMES R HEISTAND <hr/> Mailing Address 512 E WASHINGTON STREET <hr/> City ORLANDO State FL Zip Code 32801 <hr/> Purpose of Disbursement REFUND-OVER FEDERAL LIMIT 2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L28ARI00010 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) KYLE A MCGRAW HOLDINGS LTD <hr/> Mailing Address 3004 BLUEBIRD <hr/> City MIDLAND State TX Zip Code 79705 <hr/> Purpose of Disbursement REFUNDED- INSUFFICIENT DONOR INFORMATION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L28ARI00011 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) MR STEPHEN L WAY <hr/> Mailing Address 7941 KATY FWY #529 <hr/> City HOUSTON State TX Zip Code 77024 <hr/> Purpose of Disbursement REFUND-OVER FEDERAL LIMIT 2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2009M04L28ARI00012 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1943 / 1945

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.	Full Name (Last, First, Middle Initial) MR ALEXANDER HAAGEN <hr/> Mailing Address 898 NORTH SEPULVEDA SUITE 400 <hr/> City EL SEGUNDO State CA Zip Code 90245 <hr/> Purpose of Disbursement REFUND-OVER FEDERAL LIMIT 2008 <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L28ARI00016 Date of Disbursement 03 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) MR CHRISTIAN L OBERBECK <hr/> Mailing Address 2 MACPHERSON DRIVE <hr/> City GREENWICH State CT Zip Code 06803 <hr/> Purpose of Disbursement OVER FEDERAL LIMIT <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L28ARI00017 Date of Disbursement 03 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) MR CHRISTIAN L OBERBECK <hr/> Mailing Address 2 MACPHERSON DRIVE <hr/> City GREENWICH State CT Zip Code 06803 <hr/> Purpose of Disbursement OVER FEDERAL LIMIT <hr/> Candidate Name Category/ Type	Transaction ID: 2009M04L28ARI00018 Date of Disbursement 03 / 10 / 2009 <hr/> Amount of Each Disbursement this Period -1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1945 / 1945

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN NATIONAL COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CROSSROADS HOUSE

Mailing Address PO BOX 403

City BATAVIA State NY Zip Code 14021

Purpose of Disbursement
DONATION

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2009M04L29OD00001

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.00

SUBTOTAL of Disbursements This Page (optional)

100.00

TOTAL This Period (last page this line number only)

100.00