

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 77
	<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 PARTY OF VIRGINIA INC

Full Name (Last, First, Middle Initial) A. Ms. Judy A Black		Date of Receipt
Mailing Address 208 Virginia Ave		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code
Alexandria	VA	22302
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.271857
Name of Employer	Occupation	Amount of Each Receipt this Period
Brownstein, Hyatt & Farber	Attorney	<input type="text" value="1000.00"/>
Receipt For: 2012	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Morton C Blackwell		Date of Receipt
Mailing Address 3128 N. 17 St.		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2012"/>
City	State	Zip Code
Arlington	VA	22201-2854
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.271661
Name of Employer	Occupation	Amount of Each Receipt this Period
Leadership Institute	Executive	<input type="text" value="5000.00"/>
Receipt For: 2012	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Scott Bohannon		Date of Receipt
Mailing Address 2100 Waltonway Rd.		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2012"/>
City	State	Zip Code
Alexandria	VA	22307
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.271861
Name of Employer	Occupation	Amount of Each Receipt this Period
Self Employed	Business Owner	<input type="text" value="1000.00"/>
Receipt For: 2012	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="7000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>