

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

STAND AMERICA PAC

ADDRESS (number and street)

1155 - 15TH STREET NW

SUITE 410

Check if different than previously reported. (ACC)

WASHINGTON DC 20005

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

C00480681

3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

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

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

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12G)	

Election on _____ in the State of _____

(d) 30-Day **Post** -Election Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on _____ in the State of _____

5. Covering Period 01 01 2011 through 06 30 2011

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

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer Electronically Filed by SCOTT B MACKENZIE Date 07 30 2011

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)
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
STAND AMERICA PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		12194.78
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	12194.78									
(c) Total Receipts (from Line 19)	33919.27	33919.27								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46114.05	46114.05								
7. Total Disbursements (from Line 31)	43974.55	43974.55								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2139.50	2139.50								
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)	2529.11									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
STAND AMERICA PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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)	11150.00	11150.00
(ii) Unitemized	22769.27	22769.27
(iii) TOTAL (add Lines 11(a)(i) and (ii)	33919.27	33919.27
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	33919.27	33919.27
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	33919.27	33919.27
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	33919.27	33919.27

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.....	40794.55	40794.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	40794.55	40794.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	2930.00	2930.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	250.00	250.00
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))..	43974.55	43974.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	43974.55	43974.55

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)	33919.27	33919.27
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	33919.27	33919.27
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	40794.55	40794.55
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	40794.55	40794.55

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 41
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
GARY R ADAMS 927

Mailing Address 3420-H W MACARTHUR BLVD

City State Zip Code
SANTA ANA CA 92704

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

Name of Employer SELF EMPLOYED Occupation PROPERTY MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

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

Transaction ID: SA11AI.7875

Amount of Each Receipt this Period
59.00

B.

Full Name (Last, First, Middle Initial)
GARY R ADAMS 927

Mailing Address 3420-H W MACARTHUR BLVD

City State Zip Code
SANTA ANA CA 92704

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

Name of Employer SELF EMPLOYED Occupation PROPERTY MANAGEMENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 411.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 2 5 / 2 0 1 1

Transaction ID: SA11AI.7874

Amount of Each Receipt this Period
175.00

C.

Full Name (Last, First, Middle Initial)
MARILYN K AGRE 504

Mailing Address 436 N 11TH ST

City State Zip Code
FOREST CITY IA 50436

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

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

Transaction ID: SA11AI.7881

Amount of Each Receipt this Period
79.00

SUBTOTAL of Receipts This Page (optional) ► **313.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 41
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A. Full Name (Last, First, Middle Initial)
MARILYN K AGRE 504
Mailing Address 436 N 11TH ST

City State Zip Code
FOREST CITY IA 50436

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 237.00

Date of Receipt
MM / DD / YYYY
02 / 22 / 2011

Transaction ID: SA11AI.7882

Amount of Each Receipt this Period
29.00

B. Full Name (Last, First, Middle Initial)
GAIL ANDRADE 919
Mailing Address 10510 FUERTE DR

City State Zip Code
LA MESA CA 91941

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

Name of Employer ANDRADE FMAILY Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2011

Transaction ID: SA11AI.7906

Amount of Each Receipt this Period
129.00

C. Full Name (Last, First, Middle Initial)
JO ANN BAUGHMAN 973
Mailing Address PO BOX 1269

City State Zip Code
PHILOMATH OR 97370

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

Name of Employer RETIRED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
MM / DD / YYYY
01 / 21 / 2011

Transaction ID: SA11AI.7942

Amount of Each Receipt this Period
29.00

SUBTOTAL of Receipts This Page (optional) ► **187.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 41
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
JO ANN BAUGHMAN 973

Mailing Address PO BOX 1269

City State Zip Code
PHILOMATH OR 97370

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

Name of Employer RETIRED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 239.00

Date of Receipt
MM / DD / YYYY
01 / 22 / 2011

Transaction ID: SA11AI.7944

Amount of Each Receipt this Period
29.00

B.

Full Name (Last, First, Middle Initial)
JO ANN BAUGHMAN 973

Mailing Address PO BOX 1269

City State Zip Code
PHILOMATH OR 97370

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

Name of Employer RETIRED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2011

Transaction ID: SA11AI.7948

Amount of Each Receipt this Period
29.00

C.

Full Name (Last, First, Middle Initial)
JO ANN BAUGHMAN 973

Mailing Address PO BOX 1269

City State Zip Code
PHILOMATH OR 97370

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

Name of Employer RETIRED Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 367.00

Date of Receipt
MM / DD / YYYY
02 / 09 / 2011

Transaction ID: SA11AI.7945

Amount of Each Receipt this Period
99.00

SUBTOTAL of Receipts This Page (optional) ► **157.00**

TOTAL This Period (last page this line number 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 / 41
(check only one)

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A. Full Name (Last, First, Middle Initial)
JO ANN BAUGHMAN 973

Mailing Address **PO BOX 1269**

City **PHILOMATH** State **OR** Zip Code **97370**

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

Name of Employer **RETIRED** Occupation **FARMER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **426.00**

Date of Receipt **02 / 23 / 2011**
Transaction ID: SA11AI.7947
 Amount of Each Receipt this Period **59.00**

B. Full Name (Last, First, Middle Initial)
JOE DARSCH 334

Mailing Address **821 SW 36 AVE**

City **BOYNTON BEACH** State **FL** Zip Code **33435**

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

Name of Employer **ASTRO AIR INC** Occupation **PRESIDENT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **304.00**

Date of Receipt **02 / 04 / 2011**
Transaction ID: SA11AI.8047
 Amount of Each Receipt this Period **175.00**

C. Full Name (Last, First, Middle Initial)
KAYANNA R DEWEY 331

Mailing Address **3437 N MOORINGS WAY**

City **MIAMI** State **FL** Zip Code **33133**

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

Name of Employer **SELF EMPLOYED** Occupation **INVESTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **304.00**

Date of Receipt **01 / 30 / 2011**
Transaction ID: SA11AI.8061
 Amount of Each Receipt this Period **129.00**

SUBTOTAL of Receipts This Page (optional) ► **363.00**

TOTAL This Period (last page this line number 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 / 41
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
KAYANNA R DEWEY 331

Mailing Address 3437 N MOORINGS WAY

City State Zip Code
MIAMI FL 33133

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

Name of Employer Occupation
SELF EMPLOYED INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 363.00

Date of Receipt
MM / DD / YYYY
02 / 18 / 2011

Transaction ID: SA11AI.8059

Amount of Each Receipt this Period
59.00

B.

Full Name (Last, First, Middle Initial)
MR BRUCE EBERLE 221

Mailing Address 1449 MONTAGUE DR

City State Zip Code
VIENNA VA 22182

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

Name of Employer Occupation
EBERLE & ASSOCIATES BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2925.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2011

Transaction ID: SA11AI.8086

Amount of Each Receipt this Period
2925.00

C.

Full Name (Last, First, Middle Initial)
MRS KATHERINE EBERLE 221

Mailing Address 1449 MONTAGUE DR

City State Zip Code
VIENNA VA 22182

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2925.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2011

Transaction ID: SA11AI.8088

Amount of Each Receipt this Period
2925.00

SUBTOTAL of Receipts This Page (optional) ▶ **5909.00**

TOTAL This Period (last page this line number 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 / 41
(check only one)

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.

Full Name (Last, First, Middle Initial)
MR WILLIAM D GRIFFITHS 220

Mailing Address 4901 TARHEEL WAY

City ANNANDALE State VA Zip Code 22003

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

Name of Employer EBERLE & ASSOCIATES Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2925.00

Date of Receipt: 03 / 23 / 2011
Transaction ID: SA11AI.8164
 Amount of Each Receipt this Period: 2925.00

B.

Full Name (Last, First, Middle Initial)
JAMES H INESS 780

Mailing Address PO BOX 18105

City DILLEY State TX Zip Code 78017

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

Name of Employer ACOCK ENGINEERING Occupation PETROLEUM CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt: 02 / 15 / 2011
Transaction ID: SA11AI.8228
 Amount of Each Receipt this Period: 150.00

C.

Full Name (Last, First, Middle Initial)
JAMES H INESS 780

Mailing Address PO BOX 18105

City DILLEY State TX Zip Code 78017

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

Name of Employer ACOCK ENGINEERING Occupation PETROLEUM CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 404.00

Date of Receipt: 02 / 19 / 2011
Transaction ID: SA11AI.8227
 Amount of Each Receipt this Period: 79.00

SUBTOTAL of Receipts This Page (optional) ► **3154.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 41
	<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)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) ETHEL LANGFORD 815		Date of Receipt
	Mailing Address 1725 10 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
	City	State	Zip Code
	MACK	CO	81525
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8312
Name of Employer NONE		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"/> 224.00	<input type="text"/> 29.00

B.	Full Name (Last, First, Middle Initial) ETHEL LANGFORD 815		Date of Receipt
	Mailing Address 1725 10 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
	City	State	Zip Code
	MACK	CO	81525
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8304
Name of Employer NONE		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"/> 283.00	<input type="text"/> 59.00

C.	Full Name (Last, First, Middle Initial) JOHN M RODGERS 945		Date of Receipt
	Mailing Address 5440 ST HELENA HWY		<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
	NAPA	CA	94558
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8505
Name of Employer RETIRED		Occupation MARINE 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"/>
		<input type="text"/> 204.00	<input type="text"/> 29.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 117.00
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 13 / 41
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A. Full Name (Last, First, Middle Initial)
VIRGINIA E RYERSON 922

Mailing Address 202 SANTA ROSA AVE

City State Zip Code
EL CENTRO CA 92243

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt: 01 / 16 / 2011
Transaction ID: SA11AI.8528
Amount of Each Receipt this Period: 129.00

B. Full Name (Last, First, Middle Initial)
VIRGINIA E RYERSON 922

Mailing Address 202 SANTA ROSA AVE

City State Zip Code
EL CENTRO CA 92243

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 387.00

Date of Receipt: 02 / 09 / 2011
Transaction ID: SA11AI.8531
Amount of Each Receipt this Period: 129.00

C. Full Name (Last, First, Middle Initial)
VIRGINIA E RYERSON 922

Mailing Address 202 SANTA ROSA AVE

City State Zip Code
EL CENTRO CA 92243

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 466.00

Date of Receipt: 02 / 19 / 2011
Transaction ID: SA11AI.8530
Amount of Each Receipt this Period: 79.00

SUBTOTAL of Receipts This Page (optional) ▶ 337.00

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

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

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) VIRGINIA E RYERSON 922		Date of Receipt
	Mailing Address 202 SANTA ROSA AVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 2 / 2 0 1 1
	City	State	Zip Code
	EL CENTRO	CA	92243
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8529
Name of Employer NONE		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"/> 565.00	<input type="text"/> 99.00

B.	Full Name (Last, First, Middle Initial) MICHAEL SWANSON 583		Date of Receipt
	Mailing Address 6250 24TH AVE NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 9 / 2 0 1 1
	City	State	Zip Code
	RUGBY	ND	58368
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8620
Name of Employer SELF EMPLOYED		Occupation CARPENTER	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"/> 208.00	<input type="text"/> 79.00

C.	Full Name (Last, First, Middle Initial) MICHAEL SWANSON 583		Date of Receipt
	Mailing Address 6250 24TH AVE NE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 3 / 2 9 / 2 0 1 1
	City	State	Zip Code
	RUGBY	ND	58368
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8621
Name of Employer SELF EMPLOYED		Occupation CARPENTER	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"/> 327.00	<input type="text"/> 119.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 297.00
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 15 / 41
	(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)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) JACKIE VALACICH 838	Date of Receipt MM / DD / YYYY 01 / 18 / 2011
	Mailing Address 1099 SADDLE RIDGE ROAD	Transaction ID: SA11AI.8647
	City State Zip Code MOSCOW ID 83843	Amount of Each Receipt this Period 129.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SELF EMPLOYED Occupation HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 283.00	

B.	Full Name (Last, First, Middle Initial) JACKIE VALACICH 838	Date of Receipt MM / DD / YYYY 01 / 21 / 2011
	Mailing Address 1099 SADDLE RIDGE ROAD	Transaction ID: SA11AI.8648
	City State Zip Code MOSCOW ID 83843	Amount of Each Receipt this Period 29.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SELF EMPLOYED Occupation HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 312.00	

C.	Full Name (Last, First, Middle Initial) JACKIE VALACICH 838	Date of Receipt MM / DD / YYYY 01 / 31 / 2011
	Mailing Address 1099 SADDLE RIDGE ROAD	Transaction ID: SA11AI.8645
	City State Zip Code MOSCOW ID 83843	Amount of Each Receipt this Period 29.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SELF EMPLOYED Occupation HOMEMAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 341.00	

SUBTOTAL of Receipts This Page (optional)	187.00
TOTAL This Period (last page this line number 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 / 41
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) JACKIE VALACICH 838		Date of Receipt
	Mailing Address 1099 SADDLE RIDGE ROAD		<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City MOSCOW	State ID	Zip Code 83843
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: SA11AI.8644
	Name of Employer SELF EMPLOYED		Occupation HOMEMAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="129.00"/>	
		Aggregate Year-to-Date ▼ <input type="text" value="470.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="129.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="11150.00"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) AMERICAN EXPRESS	Transaction ID: SB21B.8732 Date of Disbursement																			
	Mailing Address PO Box 981540	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	6		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	6		2	0	1	1												
	City EL PASO State TX Zip Code 79998	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL RELATED EXPENSES	<table border="1"><tr><td>970.93</td></tr></table>	970.93																		
970.93																					
	Candidate Name STAND AMERICA PAC	<table border="1"><tr><td>002</td></tr></table> Category/Type	002																		
002																					
	Office Sought: <input type="checkbox"/> House <input 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: SB21B.8734 Date of Disbursement																			
	Mailing Address PO Box 981540	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	4		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	4		2	0	1	1												
	City EL PASO State TX Zip Code 79998	Amount of Each Disbursement this Period																			
	Purpose of Disbursement TRAVEL RELATED EXPENSES	<table border="1"><tr><td>1049.81</td></tr></table>	1049.81																		
1049.81																					
	Candidate Name STAND AMERICA PAC	<table border="1"><tr><td>002</td></tr></table> Category/Type	002																		
002																					
	Office Sought: <input type="checkbox"/> House <input 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) NATALI BROWN	Transaction ID: SB21B.8787 Date of Disbursement																			
	Mailing Address 1012 EDDINGTON 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>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	2		2	0	1	1												
	City CHESAPEAKE State VA Zip Code 23322	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONSULTING - ADMINISTRATION	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	Candidate Name STAND AMERICA PAC	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input 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>2270.74</td></tr></table>	2270.74
2270.74		
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)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) NATALI BROWN	Transaction ID: SB21B.8788 Date of Disbursement 01 / 09 / 2011
	Mailing Address 1012 EDDINGTON CT	
	City CHESAPEAKE State VA Zip Code 23322	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement CONSULTING - ADMINISTRATION Candidate Name STAND AMERICA PAC	001 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) NATALI BROWN	Transaction ID: SB21B.8789 Date of Disbursement 01 / 16 / 2011
	Mailing Address 1012 EDDINGTON CT	
	City CHESAPEAKE State VA Zip Code 23322	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement CONSULTING - ADMINISTRATION Candidate Name STAND AMERICA PAC	001 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) NATALI BROWN	Transaction ID: SB21B.8790 Date of Disbursement 01 / 23 / 2011
	Mailing Address 1012 EDDINGTON CT	
	City CHESAPEAKE State VA Zip Code 23322	Amount of Each Disbursement this Period 175.00
	Purpose of Disbursement CONSULTING - ADMINISTRATION Candidate Name STAND AMERICA PAC	001 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)	475.00
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)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) NATALI BROWN	Transaction ID: SB21B.8791 Date of Disbursement 02 / 02 / 2011
	Mailing Address 1012 EDDINGTON CT	
	City CHESAPEAKE State VA Zip Code 23322	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement CONSULTING - ADMINISTRATION Candidate Name STAND AMERICA PAC	001 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) NATALI BROWN	Transaction ID: SB21B.8792 Date of Disbursement 02 / 13 / 2011
	Mailing Address 1012 EDDINGTON CT	
	City CHESAPEAKE State VA Zip Code 23322	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement CONSULTING - ADMINISTRATION Candidate Name STAND AMERICA PAC	001 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) NATALI BROWN	Transaction ID: SB21B.8793 Date of Disbursement 02 / 20 / 2011
	Mailing Address 1012 EDDINGTON CT	
	City CHESAPEAKE State VA Zip Code 23322	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement CONSULTING - ADMINISTRATION Candidate Name STAND AMERICA PAC	001 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)	650.00
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)
STAND AMERICA PAC

A.

Full Name (Last, First, Middle Initial)
NATALI BROWN

Transaction ID: SB21B.8794
Date of Disbursement

Mailing Address 1012 EDDINGTON CT

/ /

City CHESAPEAKE State VA Zip Code 23322

Amount of Each Disbursement this Period

Purpose of Disbursement
CONSULTING - ADMINISTRATION

Category/
Type

Candidate Name
STAND AMERICA PAC

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

B.

Full Name (Last, First, Middle Initial)
NATALI BROWN

Transaction ID: SB21B.8795
Date of Disbursement

Mailing Address 1012 EDDINGTON CT

/ /

City CHESAPEAKE State VA Zip Code 23322

Amount of Each Disbursement this Period

Purpose of Disbursement
CONSULTING - ADMINISTRATION

Category/
Type

Candidate Name
STAND AMERICA PAC

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

C.

Full Name (Last, First, Middle Initial)
CAPITOL HILL CLUB

Transaction ID: SB21B.8738
Date of Disbursement

Mailing Address 310 FIRST STREET

/ /

City WASHINGTON State DC Zip Code 20010

Amount of Each Disbursement this Period

Purpose of Disbursement
MEMBERSHIP

Category/
Type

Candidate Name
STAND AMERICA PAC

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

SUBTOTAL of Disbursements This Page (optional) ▶

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

**SCHEDULE 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)
STAND AMERICA PAC

A. Full Name (Last, First, Middle Initial)
COUNCIL FOR NATIONAL POLICY

Mailing Address 200 MASSACHUSETTS AVE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
MEMBERSHIP

001
Category/
Type

Candidate Name
STAND AMERICA PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.8748
Date of Disbursement

01 / 08 / 2011

Amount of Each Disbursement this Period

600.00

B. Full Name (Last, First, Middle Initial)
CRAFTSMAN PRESS

Mailing Address BOX 513000

City PHILADELPHIA State PA Zip Code 19175

Purpose of Disbursement
DIRECT MAIL - PRINTING / MAILSHOP

003
Category/
Type

Candidate Name
STAND AMERICA PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.8862
Date of Disbursement

04 / 04 / 2011

Amount of Each Disbursement this Period

4012.54

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

Mailing Address 284 SHALOM RD

City WAYNESBORO State VA Zip Code 22980

Purpose of Disbursement
CONSULTING - POLITICAL

001
Category/
Type

Candidate Name
STAND AMERICA PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.8750
Date of Disbursement

01 / 14 / 2011

Amount of Each Disbursement this Period

930.00

SUBTOTAL of Disbursements This Page (optional) ▶

5542.54

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)

PAGE 22 / 41

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.

Full Name (Last, First, Middle Initial)
DIENER CONSULTING

Transaction ID: SB21B.8751
Date of Disbursement

Mailing Address 284 SHALOM RD

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

City State Zip Code
WAYNESBORO VA 22980

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
CONSULTING - POLITICAL

001

Category/
Type

Candidate Name
STAND AMERICA PAC

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

State: District:

B.

Full Name (Last, First, Middle Initial)
DOT*DOMAIN NAMES

Transaction ID: SB21B.8754
Date of Disbursement

Mailing Address 7 READING RD

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

City State Zip Code
NEW YORK NY 11011

Amount of Each Disbursement this Period

235.44

Purpose of Disbursement
WEB ADDRESS REGISTRATION

001

Category/
Type

Candidate Name
STAND AMERICA PAC

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

State: District:

C.

Full Name (Last, First, Middle Initial)
DOT*DOMAIN NAMES

Transaction ID: SB21B.8756
Date of Disbursement

Mailing Address 7 READING RD

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

City State Zip Code
NEW YORK NY 11011

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement
WEB ADDRESS REGISTRATION

001

Category/
Type

Candidate Name
STAND AMERICA PAC

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

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

5335.44

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)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) IN MOTION HOSTING	Transaction ID: SB21B.8770 Date of Disbursement
	Mailing Address 3629 SENTARA WAY	<input type="text" value="03"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City VIRGINIA BEACH State VA Zip Code 23452	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB HOSTING	<input type="text" value="69.95"/>
	Candidate Name STAND AMERICA PAC	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) IN MOTION HOSTING	Transaction ID: SB21B.8771 Date of Disbursement
	Mailing Address 3629 SENTARA WAY	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City VIRGINIA BEACH State VA Zip Code 23452	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB HOSTING	<input type="text" value="69.95"/>
	Candidate Name STAND AMERICA PAC	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) IN MOTION HOSTING	Transaction ID: SB21B.8772 Date of Disbursement
	Mailing Address 3629 SENTARA WAY	<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
	City VIRGINIA BEACH State VA Zip Code 23452	Amount of Each Disbursement this Period
	Purpose of Disbursement WEB HOSTING	<input type="text" value="69.95"/>
	Candidate Name STAND AMERICA PAC	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="209.85"/>
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)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) IN MOTION HOSTING	Transaction ID: SB21B.8773 Date of Disbursement																			
	Mailing Address 3629 SENTARA 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>6</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	3		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	3		2	0	1	1												
	City VIRGINIA BEACH State VA Zip Code 23452	Amount of Each Disbursement this Period																			
	Purpose of Disbursement WEB HOSTING	<table border="1"><tr><td>69.95</td></tr></table>	69.95																		
69.95																					
	Candidate Name STAND AMERICA PAC	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input 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) BISHOP E W JACKSON, SR	Transaction ID: SB21B.8757 Date of Disbursement																			
	Mailing Address 1012 EDDINGTON 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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	2		2	0	1	1												
	City CHESAPEAKE State VA Zip Code 23322	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONSULTING - MANAGEMENT	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name STAND AMERICA PAC	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input 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) BISHOP E W JACKSON, SR	Transaction ID: SB21B.8758 Date of Disbursement																			
	Mailing Address 1012 EDDINGTON 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>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	1		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	1		2	0	1	1												
	City CHESAPEAKE State VA Zip Code 23322	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONSULTING - MANAGEMENT	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name STAND AMERICA PAC	<table border="1"><tr><td>001</td></tr></table> Category/Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input 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>5069.95</td></tr></table>	5069.95
5069.95		
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)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) BISHOP E W JACKSON, SR Mailing Address 1012 EDDINGTON CT City CHESAPEAKE State VA Zip Code 23322 Purpose of Disbursement CONSULTING - MANAGEMENT Candidate Name STAND AMERICA PAC 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: SB21B.8759 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 1	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) BISHOP E W JACKSON, SR Mailing Address 1012 EDDINGTON CT City CHESAPEAKE State VA Zip Code 23322 Purpose of Disbursement CONSULTING - MANAGEMENT Candidate Name STAND AMERICA PAC 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: SB21B.8760 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 1	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) MLK BREAKFAST Mailing Address PO BOX 15301 City CHESEPEAKE State VA Zip Code 23322 Purpose of Disbursement TABLE Candidate Name STAND AMERICA PAC 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: SB21B.8785 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 1 1	Amount of Each Disbursement this Period 300.00

SUBTOTAL of Disbursements This Page (optional)	1800.00
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)
STAND AMERICA PAC

<p>A. Full Name (Last, First, Middle Initial) OFFICE MAX</p> <p>Mailing Address 1332 GREENBRIER PARKWAY</p> <p>City CHESEPEAKE State VA Zip Code 23320</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name STAND AMERICA PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.8798</p> <p>Date of Disbursement 01 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 899.99</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) OMEGA LIST COMPANY</p> <p>Mailing Address 1420 SPRINGHILL RD SUITE 490</p> <p>City MCLEAN State VA Zip Code 22102</p> <p>Purpose of Disbursement LIST RENTAL EXPENSE</p> <p>Candidate Name STAND AMERICA PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.8863</p> <p>Date of Disbursement 04 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 568.87</p> <p>003 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) PREMIER FULFILLMENT & PROCESSING INC</p> <p>Mailing Address 4841 DILLON DR</p> <p>City PUEBLO State CO Zip Code 81008</p> <p>Purpose of Disbursement CAGING & ESCROW SERVICES</p> <p>Candidate Name STAND AMERICA PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.8864</p> <p>Date of Disbursement 04 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 1247.20</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2716.06

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) RESPONSE ENTERPRISES INC	Transaction ID: SB21B.8820
	Mailing Address 284 SHALOM RD	Date of Disbursement 01 / 02 / 2011
	City WAYNESBORO State VA Zip Code 22980	Amount of Each Disbursement this Period 897.89
	Purpose of Disbursement DONATION PROCESSING Candidate Name STAND AMERICA PAC	002 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) RESPONSE ENTERPRISES INC	Transaction ID: SB21B.8821
	Mailing Address 284 SHALOM RD	Date of Disbursement 01 / 14 / 2011
	City WAYNESBORO State VA Zip Code 22980	Amount of Each Disbursement this Period 107.80
	Purpose of Disbursement DONATION PROCESSING Candidate Name STAND AMERICA PAC	002 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) RESPONSE ENTERPRISES INC	Transaction ID: SB21B.8822
	Mailing Address 284 SHALOM RD	Date of Disbursement 02 / 15 / 2011
	City WAYNESBORO State VA Zip Code 22980	Amount of Each Disbursement this Period 962.78
	Purpose of Disbursement DONATION PROCESSING Candidate Name STAND AMERICA PAC	002 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) ► **1968.47**

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 28 / 41

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) RESPONSE ENTERPRISES INC <hr/> Mailing Address 284 SHALOM RD <hr/> City WAYNESBORO State VA Zip Code 22980 <hr/> Purpose of Disbursement DONATION PROCESSING Candidate Name STAND AMERICA PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8823 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 1 1	Amount of Each Disbursement this Period 458.22
B.	Full Name (Last, First, Middle Initial) RESPONSE ENTERPRISES INC <hr/> Mailing Address 284 SHALOM RD <hr/> City WAYNESBORO State VA Zip Code 22980 <hr/> Purpose of Disbursement DONATION PROCESSING Candidate Name STAND AMERICA PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8824 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 1 1	Amount of Each Disbursement this Period 42.49
C.	Full Name (Last, First, Middle Initial) RESPONSE ENTERPRISES INC <hr/> Mailing Address 284 SHALOM RD <hr/> City WAYNESBORO State VA Zip Code 22980 <hr/> Purpose of Disbursement DONATION PROCESSING Candidate Name STAND AMERICA PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8825 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1	Amount of Each Disbursement this Period 49.98

SUBTOTAL of Disbursements This Page (optional) ▶

550.69

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)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) RPALP	Transaction ID: SB21B.8866 Date of Disbursement 04 / 04 / 2011
	Mailing Address 1420 SPRINGHILL RD SUITE 490	Amount of Each Disbursement this Period 2416.08
	City MCLEAN State VA Zip Code 22102	
	Purpose of Disbursement DIRECT MAIL - POSTAGE Candidate Name STAND AMERICA PAC	003 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MELODY SCULLEY	Transaction ID: SB21B.8776 Date of Disbursement 01 / 04 / 2011
	Mailing Address 1012 EDDINGTON CT	Amount of Each Disbursement this Period 1250.00
	City CHESAPEAKE State VA Zip Code 23322	
	Purpose of Disbursement CONSULTING - COMMUNICATIONS Candidate Name STAND AMERICA PAC	001 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) MELODY SCULLEY	Transaction ID: SB21B.8777 Date of Disbursement 01 / 18 / 2011
	Mailing Address 1012 EDDINGTON CT	Amount of Each Disbursement this Period 1250.00
	City CHESAPEAKE State VA Zip Code 23322	
	Purpose of Disbursement CONSULTING - COMMUNICATIONS Candidate Name STAND AMERICA PAC	001 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)	4916.08
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 30 / 41

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) MELODY SCULLEY	Transaction ID: SB21B.8778 Date of Disbursement 02 / 08 / 2011
	Mailing Address 1012 EDDINGTON CT	Amount of Each Disbursement this Period 204.00
	City CHESAPEAKE State VA Zip Code 23322	
	Purpose of Disbursement TRAVEL EXPENSES Candidate Name STAND AMERICA PAC	002 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) MELODY SCULLEY	Transaction ID: SB21B.8780 Date of Disbursement 02 / 15 / 2011
	Mailing Address 1012 EDDINGTON CT	Amount of Each Disbursement this Period 1250.00
	City CHESAPEAKE State VA Zip Code 23322	
	Purpose of Disbursement CONSULTING - COMMUNICATIONS Candidate Name STAND AMERICA PAC	001 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) MELODY SCULLEY	Transaction ID: SB21B.8781 Date of Disbursement 03 / 02 / 2011
	Mailing Address 1012 EDDINGTON CT	Amount of Each Disbursement this Period 710.40
	City CHESAPEAKE State VA Zip Code 23322	
	Purpose of Disbursement TRAVEL EXPENSES Candidate Name STAND AMERICA PAC	002 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)	2164.40
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)

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

<p>A. Full Name (Last, First, Middle Initial) MELODY SCULLEY</p> <p>Mailing Address 1012 EDDINGTON CT</p> <p>City CHESAPEAKE State VA Zip Code 23322</p> <p>Purpose of Disbursement CONSULTING - COMMUNICATIONS</p> <p>Candidate Name STAND AMERICA PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.8782</p> <p>Date of Disbursement 03 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) MELODY SCULLEY</p> <p>Mailing Address 1012 EDDINGTON CT</p> <p>City CHESAPEAKE State VA Zip Code 23322</p> <p>Purpose of Disbursement CONSULTING - COMMUNICATIONS</p> <p>Candidate Name STAND AMERICA PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.8783</p> <p>Date of Disbursement 04 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) MELODY SCULLEY</p> <p>Mailing Address 1012 EDDINGTON CT</p> <p>City CHESAPEAKE State VA Zip Code 23322</p> <p>Purpose of Disbursement CONSULTING - COMMUNICATIONS</p> <p>Candidate Name STAND AMERICA PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.8784</p> <p>Date of Disbursement 04 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>001 Category/ Type</p>

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)

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) SOUTHWEST AIR	Transaction ID: SB21B.8833 Date of Disbursement MM / DD / YYYY 02 / 10 / 2011
	Mailing Address AIRPORT BLVD	Amount of Each Disbursement this Period 633.80
	City DALLAS State TX Zip Code 75225	
	Purpose of Disbursement AIR TRAVEL Candidate Name STAND AMERICA PAC	002 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) SOUTHWEST AIR	Transaction ID: SB21B.8834 Date of Disbursement MM / DD / YYYY 02 / 10 / 2011
	Mailing Address AIRPORT BLVD	Amount of Each Disbursement this Period 504.90
	City DALLAS State TX Zip Code 75225	
	Purpose of Disbursement AIR TRAVEL Candidate Name STAND AMERICA PAC	002 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) SOUTHWEST AIR	Transaction ID: SB21B.8835 Date of Disbursement MM / DD / YYYY 02 / 10 / 2011
	Mailing Address AIRPORT BLVD	Amount of Each Disbursement this Period 10.00
	City DALLAS State TX Zip Code 75225	
	Purpose of Disbursement AIRLINE FEE Candidate Name STAND AMERICA PAC	002 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) ▶

1148.70

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)
STAND AMERICA PAC

<p>A. Full Name (Last, First, Middle Initial) SOUTHWEST AIR</p> <p>Mailing Address AIRPORT BLVD</p> <p>City DALLAS State TX Zip Code 75225</p> <p>Purpose of Disbursement AIRLINE FEE</p> <p>Candidate Name STAND AMERICA PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.8836</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) SOUTHWEST AIR</p> <p>Mailing Address AIRPORT BLVD</p> <p>City DALLAS State TX Zip Code 75225</p> <p>Purpose of Disbursement AIRLINE FEE</p> <p>Candidate Name STAND AMERICA PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.8837</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) SOUTHWEST AIR</p> <p>Mailing Address AIRPORT BLVD</p> <p>City DALLAS State TX Zip Code 75225</p> <p>Purpose of Disbursement AIRLINE FEE</p> <p>Candidate Name STAND AMERICA PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.8838</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="30.00"/>
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)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) TRI-STATE ENVELOPE	Transaction ID: SB21B.8867 Date of Disbursement
	Mailing Address 6900 FAIGLE RD	<input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City BELTSVILLE State MD Zip Code 20705	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - PRINTING	<input type="text" value="1633.89"/>
	Candidate Name STAND AMERICA PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WILCO	Transaction ID: SB21B.8857 Date of Disbursement
	Mailing Address 4200 PORTSMOUTH BLVD	<input type="text" value="03"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City CHESAPEAKE State VA Zip Code 23321	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="47.00"/>
	Candidate Name STAND AMERICA PAC	<input type="text" value="001"/> 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) WILCO	Transaction ID: SB21B.8858 Date of Disbursement
	Mailing Address 4200 PORTSMOUTH BLVD	<input type="text" value="04"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City CHESAPEAKE State VA Zip Code 23321	Amount of Each Disbursement this Period
	Purpose of Disbursement OFFICE SUPPLIES	<input type="text" value="46.50"/>
	Candidate Name STAND AMERICA PAC	<input type="text" value="001"/> 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="1727.39"/>
TOTAL This Period (last page this line number only)	<input type="text" value="38975.31"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) CANTOR FOR CONGRESS	Transaction ID: SB23.8813
	Mailing Address P.O. BOX 17813	Date of Disbursement 01 / 26 / 2011
	City RICHMOND State VA Zip Code 23226	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/Type
	Candidate Name ERIC CANTOR	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) COALITION FOR AMERICA	Transaction ID: SB23.8817
	Mailing Address PO BOX 44087	Date of Disbursement 03 / 30 / 2011
	City INDIANAPOLIS State IN Zip Code 46244	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement DINNER TICKET	011 Category/Type
	Candidate Name COALITION FOR AMERICA	
	Office Sought: <input type="checkbox"/> House <input 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) JACKSON FOR VIRGINIA	Transaction ID: SB23.8819
	Mailing Address PO BOX 15003	Date of Disbursement 04 / 04 / 2011
	City CHESAPEAKE State VA Zip Code 23328	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011 Category/Type
	Candidate Name EARL W SR JACKSON	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2020.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A.	Full Name (Last, First, Middle Initial) REAGAN LEADERSHIP PAC Mailing Address 11321 HUNT FARM LANE City OAKTON State VA Zip Code 22124 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name REAGAN LEADERSHIP PAC Office Sought: <input type="checkbox"/> House <input 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: SB23.8815 Date of Disbursement 03 / 29 / 2011	Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) REPUBLICAN PARTY OF CHESEPEAKE VIRGINIA Mailing Address 115 EAST GRACE STREET City RICHMOND State VA Zip Code 23219 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name STAND AMERICA PAC Office Sought: <input type="checkbox"/> House <input 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: SB23.8814 Date of Disbursement 03 / 21 / 2011	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) REPUBLICAN PARTY OF CHESEPEAKE VIRGINIA Mailing Address 115 EAST GRACE STREET City RICHMOND State VA Zip Code 23219 Purpose of Disbursement DINNER TICKET Candidate Name STAND AMERICA PAC Office Sought: <input type="checkbox"/> House <input 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: SB23.8818 Date of Disbursement 03 / 31 / 2011	Amount of Each Disbursement this Period 100.00

SUBTOTAL of Disbursements This Page (optional)	850.00
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 37 / 41

<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)
STAND AMERICA PAC

A.

Full Name (Last, First, Middle Initial)
REPUBLICAN PARTY OF VIRGINIA

Transaction ID: SB23.8816

Date of Disbursement

Mailing Address 115 EAST GRACE STREET

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

City RICHMOND State VA Zip Code 23219

Amount of Each Disbursement this Period

60.00

Purpose of Disbursement
DINNER TICKET

011
Category/ Type

Candidate Name
STAND AMERICA PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

60.00

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

2930.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 41

<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)
STAND AMERICA PAC

A.

Full Name (Last, First, Middle Initial)
VISION AMERICA

Mailing Address 800 COMMERCE ST

City HOUSTON State TX Zip Code 77002

Purpose of Disbursement
DONATION

Candidate Name
STAND AMERICA PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: SB29.8861

Date of Disbursement

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

Amount of Each Disbursement this Period

250.00

012
Category/
Type

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00

SCHEDULE C (FEC Form 3X)

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

LOANS

NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

Transaction ID: SC/10.4635

LOAN SOURCE Full Name (Last, First, Middle Initial) BISHOP E W JACKSON, SR	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1012 EDDINGTON CT	
City CHESAPEAKE State VA ZIP Code 23322	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100.00	0.00	100.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 4	D D 1 6	Y Y Y Y 2 0 1 0	UPOND DEMAND
		0.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="100.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="100.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRAFTSMAN PRESS			Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address BOX 513000			
City PHILADELPHIA	State PA	ZIP Code 19175	

Outstanding Balance Beginning This Period 4012.54		Transaction ID: SD10.6929	
Amount Incurred This Period 0.00	Payment This Period 4012.54	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor ECG DATA CENTER			Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 1420 SPRINGHILL RD SUITE 490			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 627.80		Transaction ID: SD10.6930	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 627.80	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor OMEGA LIST COMPANY			Nature of Debt (Purpose): LIST RENTALS
Mailing Address 1420 SPRINGHILL RD SUITE 490			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 2370.18		Transaction ID: SD10.6931	
Amount Incurred This Period 0.00	Payment This Period 568.87	Outstanding Balance at Close of This Period 1801.31	

1) SUBTOTALS This Period This Page (optional).....	▶	2429.11
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
STAND AMERICA PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor PREMIER FULFILLMENT & PROCESSING INC			Nature of Debt (Purpose): CAGING & ESCROW SERVICES
Mailing Address 4841 DILLON DR			
City PUEBLO	State CO	ZIP Code 81008	

Outstanding Balance Beginning This Period 1002.20		Transaction ID: SD10.6932	
Amount Incurred This Period 245.00	Payment This Period 1247.20	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RPALP			Nature of Debt (Purpose): DIRECT MAIL - POSTAGE
Mailing Address 1420 SPRINGHILL RD SUITE 490			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 2416.08		Transaction ID: SD10.6921	
Amount Incurred This Period 0.00	Payment This Period 2416.08	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor TRI-STATE ENVELOPE			Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 6900 FAIGLE RD			
City BELTSVILLE	State MD	ZIP Code 20705	

Outstanding Balance Beginning This Period 1633.89		Transaction ID: SD10.6933	
Amount Incurred This Period 0.00	Payment This Period 1633.89	Outstanding Balance at Close of This Period 0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
2) TOTALS This Period (last page this line number only).....	▶	2429.11
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	100.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	2529.11