



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
REPUBLICAN PARTY OF VIRGINIA INC

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		125086.76
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	131076.96									
(c) Total Receipts (from Line 19) .....	452458.79	1415779.56								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	583535.75	1540866.32								
7. Total Disbursements (from Line 31) .....	326706.78	1284037.35								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	256828.97	256828.97								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	319212.91									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
 REPUBLICAN PARTY OF VIRGINIA INC

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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) .....	74465.00	375434.00
(ii) Unitemized .....	10615.79	375643.49
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	85080.79	751077.49
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	52000.00	63900.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	137080.79	814977.49
12. Transfers From Affiliated/Other Party Committees .....	315000.00	448072.00
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	17411.90
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	378.00	20102.58
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	115215.59
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	115215.59
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	452458.79	1415779.56
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	452458.79	1300563.97

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	409.88	55914.02
(ii) Non-Federal Share.....	2322.66	137760.68
(b) Other Federal Operating Expenditures.....	0.00	92752.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2732.54	286427.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	2687.55
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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).....	149089.99	170954.47
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	246.00
(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	246.00
29. Other Disbursements.....	0.00	0.00
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 .....	174884.25	823721.93
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	174884.25	823721.93
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	326706.78	1284037.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	324384.12	1146276.67

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	137080.79	814977.49
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	246.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	137080.79	814731.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	409.88	148666.72
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	17411.90
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	409.88	131254.82

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Wayne Abernathy		Date of Receipt
	Mailing Address 13115 Pavilion Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Fairfax	VA	22033
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.255400
Name of Employer Requested		Occupation Requested	Amount of Each Receipt this Period
Receipt For: 2010		Aggregate Year-to-Date ▼	<input type="text"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/> 500.00	<input type="text"/> 500.00
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Kelly Bishard		Date of Receipt
	Mailing Address 196 Willow Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Virginia Beach	VA	23451
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.255039
Name of Employer None		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2010		Aggregate Year-to-Date ▼	<input type="text"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/> 10000.00	<input type="text"/> 10000.00
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) Ms. Erika Blanton		Date of Receipt
	Mailing Address 4807 Lockgreen Cir.		<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
	Richmond	VA	23226
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.255161
Name of Employer HCA		Occupation Physician	Amount of Each Receipt this Period
Receipt For: 2010		Aggregate Year-to-Date ▼	<input type="text"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/> 250.00	<input type="text"/> 250.00
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 10750.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 35
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. George Brauburger		Date of Receipt
	Mailing Address 3103 Waterton Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Midlothian	VA	23113
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.255366
		Amount of Each Receipt this Period	<input type="text"/>
			250.00
Name of Employer Brauburger Asset Mgmt		Occupation President	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
			<input type="text"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Lt. Col. Richard A Brown		Date of Receipt
	Mailing Address PO Box 40		<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
	Rockbridge Baths	VA	24473
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.255165
		Amount of Each Receipt this Period	<input type="text"/>
			250.00
Name of Employer Retired		Occupation Retired	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
			<input type="text"/> 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Scott Carr		Date of Receipt
	Mailing Address 400 North Main St.		<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
	Suffolk	VA	23434-4425
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.255184
		Amount of Each Receipt this Period	<input type="text"/>
			250.00
Name of Employer Wells Fargo Advisors		Occupation Investments	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
			<input type="text"/> 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/>
	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs. Elizabeth P Christian		Date of Receipt	
	Mailing Address 2300 Cedarfield Pkwy Apt 150		M M / D D / Y Y Y Y Y 10 / 07 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.255155
	Richmond	VA	23233-1949	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		500.00	
Name of Employer Retired		Occupation Retired		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Linwood M. Cobb, III		Date of Receipt	
	Mailing Address 11216 Byfield Ct		M M / D D / Y Y Y Y Y 10 / 03 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.255043
	Richmond	VA	23233-1820	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1000.00	
Name of Employer A/C Utility Supply Co.		Occupation Owner		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2045.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. James C Conley, Jr.		Date of Receipt	
	Mailing Address 8604 Village Park Place		M M / D D / Y Y Y Y Y 10 / 11 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.255252
	Chevy Chase	MD	20815-5743	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		10000.00	
Name of Employer Transwestern		Occupation Sr. Vice President		
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	11500.00
<b>TOTAL</b> This Period (last page this line number 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 / 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. John J Davis

Mailing Address 583 Wilton Creek Rd.

City State Zip Code  
Hartfield VA 23071-3032

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

Name of Employer Retired Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

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

**Transaction ID:** SA11AI.255083

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Mrs. Kim C Dwyer

Mailing Address 8314 Poplar Hollow Trl

City State Zip Code  
Richmond VA 23235

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

Name of Employer CJW Medical Center Occupation Pharmacist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 775.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 1 0

**Transaction ID:** SA11AI.255123

Amount of Each Receipt this Period  
555.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Hollis D Ellis

Mailing Address 917 Mains Creek Rd

City State Zip Code  
Chesapeake VA 23320

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

Name of Employer CAE Inc Occupation Civil Engineer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

**Transaction ID:** SA11AI.255248

Amount of Each Receipt this Period  
165.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **820.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. William L Ferrar

Mailing Address 2400 Asker Court

City Richmond State VA Zip Code 23233-6610

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

Name of Employer Requested Occupation Requested

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 12 / 2010  
**Transaction ID:** SA11AI.255303  
Amount of Each Receipt this Period 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Steve U. Fey

Mailing Address 1985 Piper Way

City Keswick State VA Zip Code 22947

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

Name of Employer Tridium Occupation President

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 610.00

Date of Receipt 10 / 12 / 2010  
**Transaction ID:** SA11AI.255321  
Amount of Each Receipt this Period 340.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. David M Foster

Mailing Address 2607 N Wakefield St

City Arlington State VA Zip Code 22207-4128

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

Name of Employer Fulbright & Jaworski LLP Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2040.00

Date of Receipt 10 / 12 / 2010  
**Transaction ID:** SA11AI.255387  
Amount of Each Receipt this Period 1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2090.00

**TOTAL** This Period (last page this line number 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 / 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.** Full Name (Last, First, Middle Initial)  
Mr. William H Fralin, Jr.  
Mailing Address 2830 Wilton Rd. SW

City Roanoke	State VA	Zip Code 24014
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FEC ID number of contributing federal political committee. **C**

Name of Employer Estate Planning Law Firm	Occupation Attorney
--	------------------------

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID:** SA11AI.255398  
 Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Virginia Rae Haggerty  
Mailing Address 3309 Timber Ridge

City Williamsburg	State VA	Zip Code 23185
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FEC ID number of contributing federal political committee. **C**

Name of Employer None	Occupation Student
--------------------------	-----------------------

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID:** SA11AI.255042  
 Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ross Jenkins  
Mailing Address PO Box 1449

City Gate City	State VA	Zip Code 24251
-------------------	-------------	-------------------

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

Name of Employer Hob-Nob Drive-in	Occupation Restaurant
--------------------------------------	--------------------------

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

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

**Transaction ID:** SA11AI.255044  
 Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (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 / 35
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Daniel M. Kohler

Mailing Address 1604 Noral PI

City State Zip Code  
Alexandria VA 22308-1800

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

Name of Employer Occupation  
ICMA-RC Economist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
10 / 08 / 2010

**Transaction ID:** SA11AI.255193

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
Dr. Edgar C Lawson

Mailing Address 108 Holly Ct

City State Zip Code  
Charlottesville VA 22901-3150

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

Name of Employer Occupation  
Self Ophthalmologist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  
MM / DD / YYYY  
10 / 04 / 2010

**Transaction ID:** SA11AI.255053

Amount of Each Receipt this Period  
125.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Gary Maloney

Mailing Address PO Box 7272

City State Zip Code  
McLean VA 22106

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

Name of Employer Occupation  
Self Consultant

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
10 / 12 / 2010

**Transaction ID:** SA11AI.255298

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **675.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 35  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.**

Full Name (Last, First, Middle Initial)  
Jeffrey McWaters

Mailing Address 1501 Oak Hill Ct

City State Zip Code  
Virginia Beach VA 23454

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

Name of Employer Occupation  
Amerigroup Corp CEO

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
10 / 01 / 2010

**Transaction ID:** SA11AI.255040

Amount of Each Receipt this Period  
10000.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Roger Milliken

Mailing Address PO Box 3167

City State Zip Code  
Spartansburg SC 29304-3167

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

Name of Employer Occupation  
Chairman of the Board Milliken & Company

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
10 / 12 / 2010

**Transaction ID:** SA11AI.255386

Amount of Each Receipt this Period  
10000.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Devin Millson

Mailing Address 8043 Sleepy View Lane

City State Zip Code  
Springfield VA 22153

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

Name of Employer Occupation  
None Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
10 / 03 / 2010

**Transaction ID:** SA11AI.255045

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **20500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Michael Mullen		Date of Receipt
	Mailing Address 1029 N. Stuart St. Apt. 308		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Arlington	VA	22201
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer None		Occupation Student	<b>Transaction ID:</b> SA11AI.255172
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. David A Norcross		Date of Receipt
	Mailing Address 10 W. Rosemont Ave.		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Alexandria	VA	22301-2624
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Blank, Rome LLP		Occupation Partner	<b>Transaction ID:</b> SA11AI.255067
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. James G. Petrine		Date of Receipt
	Mailing Address 992 Vista Parkway		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Hardy	VA	24101-3326
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Homebuilder	<b>Transaction ID:</b> SA11AI.255395
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="7500.00"/>	<input type="text" value="7500.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="12750.00"/>
<b>TOTAL</b> 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 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.** Full Name (Last, First, Middle Initial)  
Mr. Karl D. Pierson

Mailing Address 1004 White Chimney Ct

City State Zip Code  
Great Falls VA 22066

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

Name of Employer Self Occupation Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1300.00

Date of Receipt  

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

**Transaction ID:** SA11AI.255195

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
Ms. Sarah L. Pyle

Mailing Address 1456 Hampton Hill Cir

City State Zip Code  
Mc Lean VA 22101-6010

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

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

**Transaction ID:** SA11AI.255079

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. James W Rawles

Mailing Address 1205 N. Bay Shore Dr.

City State Zip Code  
Virginia Beach VA 23451

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

Name of Employer Gastroenterology LTD. Occupation Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

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

**Transaction ID:** SA11AI.255086

Amount of Each Receipt this Period  
1000.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 35

(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.**

Full Name (Last, First, Middle Initial)  
Kendall Rose

Mailing Address 3122 Juniper Ln

City State Zip Code  
Falls Church VA 22044

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

Name of Employer Occupation  
Strategic Group Investment Management

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
1100.00

Date of Receipt

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

Transaction ID: SA11AI.255047

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
Ms. Katherine Thompson

Mailing Address 9035 Golden Sunset

City State Zip Code  
Springfield VA 22153

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
350.00

Date of Receipt

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

Transaction ID: SA11AI.255299

Amount of Each Receipt this Period

165.00

**C.**

Full Name (Last, First, Middle Initial)  
L. D. Walker

Mailing Address 914 Mulberry Rd.

City State Zip Code  
Martinsville VA 24112

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

Name of Employer Occupation  
None Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

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

Transaction ID: SA11AI.255397

Amount of Each Receipt this Period

10000.00

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

10665.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 35
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Kristi Way

Mailing Address 9213 Stone Meadow Drive

City Richmond State VA Zip Code 23228

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

Name of Employer Congressman Eric Cantor Occupation Chief of Staff

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 08 / 2010  
**Transaction ID: SA11AI.255192**  
 Amount of Each Receipt this Period 165.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Thomas P. Wright

Mailing Address 75 Dogwood Rise

City Lexington State VA Zip Code 24450-8907

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

Name of Employer None Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 07 / 2010  
**Transaction ID: SA11AI.255141**  
 Amount of Each Receipt this Period 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	665.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	74465.00

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

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

FOR LINE NUMBER: PAGE 18 / 35  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.** Full Name (Last, First, Middle Initial)  
CANTOR FOR CONGRESS

Mailing Address P. O. Box 17813

City State Zip Code  
Richmond VA 23226

FEC ID number of contributing federal political committee. **C** C00355461

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 9500.00

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

**Transaction ID:** SA11C.255036

Amount of Each Receipt this Period  
2000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF FRANK WOLF

Mailing Address P.O. Box 710235

City State Zip Code  
Oak Hill VA 20171

FEC ID number of contributing federal political committee. **C** C00166017

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

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

**Transaction ID:** SA11C.255033

Amount of Each Receipt this Period  
50000.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 52000.00

**TOTAL** This Period (last page this line number only) ..... ► 52000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 35
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.**

Full Name (Last, First, Middle Initial) 7TH DISTRICT REPUBLICAN COMMITTEE		Date of Receipt
Mailing Address 25 East Main Street		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
City	State	Zip Code
Richmond	VA	23219
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00189100"/>	<b>Transaction ID:</b> SA12.255032
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="260000.00"/>	<input type="text" value="260000.00"/>
		contribution

**B.**

Full Name (Last, First, Middle Initial) 7TH DISTRICT REPUBLICAN COMMITTEE		Date of Receipt
Mailing Address 25 East Main Street		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
City	State	Zip Code
Richmond	VA	23219
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00189100"/>	<b>Transaction ID:</b> SA12.255034
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="315000.00"/>	<input type="text" value="55000.00"/>
		Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="315000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="315000.00"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 35
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A.**

Full Name (Last, First, Middle Initial) Commonwealth of Virginia		Date of Receipt
Mailing Address Department of Taxation 3600 W. Broad St		<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 Richmond State VA Zip Code 23230		<input type="text"/> 1 0 / <input type="text"/> 0 4 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		<b>Transaction ID:</b> SA17.255030
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 358.00
Aggregate Year-to-Date ▼ <input type="text"/> 20082.58		Tax check-off contribution

**B.**

Full Name (Last, First, Middle Initial) Commonwealth of Virginia		Date of Receipt
Mailing Address Department of Taxation 3600 W. Broad St		<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 Richmond State VA Zip Code 23230		<input type="text"/> 1 0 / <input type="text"/> 0 7 / <input type="text"/> 2 0 1 0
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		<b>Transaction ID:</b> SA17.255035
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 20.00
Aggregate Year-to-Date ▼ <input type="text"/> 20102.58		Tax check-off contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 378.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 378.00

# 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 21 / 35

<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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<b>A.</b> Full Name (Last, First, Middle Initial) Anthem Dental Alternative <hr/> Mailing Address P. O. Box 25005 <hr/> City Richmond State VA Zip Code 23260 <hr/> Purpose of Disbursement Employee dental ins. premium Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.254976 Date of Disbursement 10 / 05 / 2010
	Amount of Each Disbursement this Period 327.91
	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Creative Direct, LLC <hr/> Mailing Address 25 E. Main Street Suite 200 <hr/> City Richmond State VA Zip Code 23219 <hr/> Purpose of Disbursement Exempt Party Act.-5th CD Campaign mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.255404 Date of Disbursement 10 / 07 / 2010
	Amount of Each Disbursement this Period 26763.00
	<input type="text" value="006"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Creative Direct, LLC <hr/> Mailing Address 25 E. Main Street Suite 200 <hr/> City Richmond State VA Zip Code 23219 <hr/> Purpose of Disbursement Exempt Party Act.-7th CD Campaign mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.255405 Date of Disbursement 10 / 07 / 2010
	Amount of Each Disbursement this Period 7573.00
	<input type="text" value="006"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**34663.91**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 35

<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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Creative Direct, LLC</p> <hr/> <p>Mailing Address 25 E. Main Street Suite 200</p> <hr/> <p>City Richmond State VA Zip Code 23219</p> <hr/> <p>Purpose of Disbursement Exempt Party Act.-7th CD campaign mailer</p> <p>Candidate Name</p> <hr/> <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><b>Transaction ID:</b> SB30B.255406</p> <p>Date of Disbursement 10 / 07 / 2010</p> <hr/> <p>Amount of Each Disbursement this Period 7573.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Creative Direct, LLC</p> <hr/> <p>Mailing Address 25 E. Main Street Suite 200</p> <hr/> <p>City Richmond State VA Zip Code 23219</p> <hr/> <p>Purpose of Disbursement Exempt Party Act.-7th CD campaign mailer</p> <p>Candidate Name</p> <hr/> <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><b>Transaction ID:</b> SB30B.255407</p> <p>Date of Disbursement 10 / 08 / 2010</p> <hr/> <p>Amount of Each Disbursement this Period 7573.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Creative Direct, LLC</p> <hr/> <p>Mailing Address 25 E. Main Street Suite 200</p> <hr/> <p>City Richmond State VA Zip Code 23219</p> <hr/> <p>Purpose of Disbursement Exempt Party Act.-7th CD campaign mailers(3)</p> <p>Candidate Name</p> <hr/> <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><b>Transaction ID:</b> SB30B.255408</p> <p>Date of Disbursement 10 / 13 / 2010</p> <hr/> <p>Amount of Each Disbursement this Period 79070.00</p>

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

94216.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

A.	Full Name (Last, First, Middle Initial) Jordan Dix <hr/> Mailing Address 155 Fairmont Circle <hr/> City Danville State VA Zip Code 24541 <hr/> Purpose of Disbursement Reimburse mileage expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.254995 Date of Disbursement 10 / 05 / 2010 <hr/> Amount of Each Disbursement this Period 380.96
B.	Full Name (Last, First, Middle Initial) Vincent S Kreul <hr/> Mailing Address 106 Oak Crest Cir Apt 6 <hr/> City Bristol State VA Zip Code 24201 <hr/> Purpose of Disbursement Reimburse mileage expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.254996 Date of Disbursement 10 / 05 / 2010 <hr/> Amount of Each Disbursement this Period 497.46
C.	Full Name (Last, First, Middle Initial) Principium Consulting, Inc <hr/> Mailing Address 11017 Milestone Dr <hr/> City Mechanicsville State VA Zip Code 23116 <hr/> Purpose of Disbursement Exempt Party Act.-2nd CD campaign mailers(2) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB30B.255409 Date of Disbursement 10 / 13 / 2010 <hr/> Amount of Each Disbursement this Period 43254.91

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

**44133.33**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Quickbooks Payroll Service</p> <p>Mailing Address P. O. Box 6170</p> <p>City Fredericksburg State VA Zip Code 22403</p> <p>Purpose of Disbursement Payroll tax adjustment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.254977</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="0.08"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) B Elsie Rusnak, Mrs.</p> <p>Mailing Address 400 Rives Road</p> <p>City Petersburg State VA Zip Code 23805</p> <p>Purpose of Disbursement Reimburse meals expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.254997</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="232.91"/></p> <p>Category/Type: <input type="text" value="002"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ms. Melody Scalley</p> <p>Mailing Address PO Box 1005</p> <p>City Eastville State VA Zip Code 23347</p> <p>Purpose of Disbursement Reimburse mileage expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB30B.254993</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p>Category/Type: <input type="text" value="002"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="732.99"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 35

<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 type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

A.	Full Name (Last, First, Middle Initial) Wireless Revolutions		Transaction ID: SB30B.254984	
	Mailing Address 729-C S. Battlefield Blvd		Date of Disbursement 10 / 11 / 2010	
	City Chesapeake	State VA	Zip Code 23322	Amount of Each Disbursement this Period 1125.00
	Purpose of Disbursement Cell phone minutes		001	
	Candidate Name		Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State: District:			

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

1125.00

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

174871.23

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor FLS Connect, LLC	Nature of Debt (Purpose): Telemarketing fundraising for Party
Mailing Address 7300 Hudson Blvd Suite 270	
City State ZIP Code Saint Paul MN 55128	

Outstanding Balance Beginning This Period 134513.50	<b>Transaction ID:</b> SD10.211263	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 134513.50

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor LeClair Ryan	Nature of Debt (Purpose): Disputed debt:legal fees-5th CD recount
Mailing Address PO Box 2449	
City State ZIP Code Richmond VA 23218	

Outstanding Balance Beginning This Period 11170.00	<b>Transaction ID:</b> SD10.213365	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11170.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Platinum Plus for Business	Nature of Debt (Purpose): Credit card charges
Mailing Address P. O. Box 15469	
City State ZIP Code Wilmington DE 19886	

Outstanding Balance Beginning This Period 12531.40	<b>Transaction ID:</b> SD10.229283	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 12531.40

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	158214.90
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

B. Form/Schedule : **SD10**  
Transaction ID : **SD10.213365**

The RPV has resolved with LeClair Ryan the dispute regarding this legal fees bill totalling \$55,212.-41, and RPV will pay the entire outstanding balance of the same.

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Printing Express			Nature of Debt (Purpose): Invitations for Victory dinner
Mailing Address P. O. Box 1975			
City Harrisonburg	State VA	ZIP Code 22801	

Outstanding Balance Beginning This Period <input type="text" value="61471.66"/>		<b>Transaction ID:</b> SD10.229282	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="61471.66"/>	

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Purchase Power			Nature of Debt (Purpose): Meter postage
Mailing Address P. O. Box 856042			
City Louisville	State KY	ZIP Code 40285	

Outstanding Balance Beginning This Period <input type="text" value="7272.57"/>		<b>Transaction ID:</b> SD10.224984	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7272.57"/>	

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Sam's Club Discover			Nature of Debt (Purpose): Room rental & event catering
Mailing Address P. O. Box 960016			
City Orlando	State FL	ZIP Code 32896	

Outstanding Balance Beginning This Period <input type="text" value="2362.94"/>		<b>Transaction ID:</b> SD10.254506	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2362.94"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="71107.17"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 29 / 35	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Unisource Direct LLC			Nature of Debt (Purpose): Direct mail production
Mailing Address 7 North Pinckney St			
City Madison	State WI	ZIP Code 53703	

Outstanding Balance Beginning This Period		Transaction ID: SD10.224987	
89890.84			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	89890.84	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	89890.84
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	319212.91
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	319212.91

**SCHEDULE F (FEC Form 3X)**  
**ITEMIZED COORDINATED EXPENDITURES MADE BY**  
**POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)**  
**ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE**  
**(2 U.S.C. §441a(d))** (To be used only by Political Committees in the General Election)

NAME OF COMMITTEE (In Full) REPUBLICAN PARTY OF VIRGINIA INC	
Has your committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Full Name of Subordinate Committee
If YES, name the designating committee: REPUBLICAN NATIONAL COMMITTEE	Mailing Address
	City State ZIP Code

Full Name (Last, First, Middle Initial) of Each Payee Creative Direct, LLC	Purpose of Expenditure Campaign mailer production	006 Category/Type
Mailing Address 25 E. Main Street Suite 200		
City State ZIP Code Richmond VA 23219	Date MM / DD / YYYY 10 / 07 / 2010	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House State: VA FRANK R WOLF Senate District: 10 Presidential	Amount 29000.00	
Aggregate General Election Expenditure for this Candidate ▶	29000.00	
Transaction ID: SF.255403		

Full Name (Last, First, Middle Initial) of Each Payee Mentzer Media Services	Purpose of Expenditure Video production cost	004 Category/Type
Mailing Address 600 Fairmount		
City State ZIP Code Towson MD 21286	Date MM / DD / YYYY 10 / 12 / 2010	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House State: VA ERIC CANTOR Senate District: 07 Presidential	Amount 80000.00	
Aggregate General Election Expenditure for this Candidate ▶	80000.00	
Transaction ID: SF.255027		

Full Name (Last, First, Middle Initial) of Each Payee Targeted Creative Communications, Inc	Purpose of Expenditure Campaign mailer production	006 Category/Type
Mailing Address 106 S. Columbus St.		
City State ZIP Code Alexandria VA 22314	Date MM / DD / YYYY 10 / 05 / 2010	
Name of Federal Candidate Supported Office Sought: <input checked="" type="checkbox"/> House State: VA KEITH S FIMIAN Senate District: 11 Presidential	Amount 13247.78	
Aggregate General Election Expenditure for this Candidate ▶	35112.26	
Transaction ID: SF.255022		

<b>SUBTOTAL</b> of Expenditures This Page (optional) ..... ▶	122247.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<b>A. Full Name (Last, First, Middle Initial)</b> Elavon			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7300 Chapman Highway			Allocated Activity or Event Year-To-Date 126573.30	
City	State	Zip Code	001	Category/ Type
Knoxville	TN	37920		
Purpose of Disbursement: Credit card/merchant fees				
Activity or Event Identifier: Administrative			Date <span style="font-size:small;">M M / D D / Y Y Y Y</span> 1 0 / 0 4 / 2 0 1 0	
			Transaction ID: H4.254985	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.62		587.16		690.78

<b>B. Full Name (Last, First, Middle Initial)</b> Authorize.net			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 808 E. Utah Valley Dr			Allocated Activity or Event Year-To-Date 126610.60	
City	State	Zip Code	001	Category/ Type
American Fork	UT	84003		
Purpose of Disbursement: Online credit card transaction fee				
Activity or Event Identifier: Administrative			Date <span style="font-size:small;">M M / D D / Y Y Y Y</span> 1 0 / 0 4 / 2 0 1 0	
			Transaction ID: H4.254986	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.59		31.71		37.30

<b>C. Full Name (Last, First, Middle Initial)</b> Comcast Cable			<b>Type of Allocated Activity:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 918 N Boulevard			Allocated Activity or Event Year-To-Date 127198.29	
City	State	Zip Code	001	Category/ Type
Richmond	VA	23230		
Purpose of Disbursement: Internet services				
Activity or Event Identifier: Administrative			Date <span style="font-size:small;">M M / D D / Y Y Y Y</span> 1 0 / 0 5 / 2 0 1 0	
			Transaction ID: H4.254987	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.15		499.54		587.69

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
197.36		1118.41		1315.77

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

<b>A. Full Name (Last, First, Middle Initial)</b> Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P O Box 17464			Allocated Activity or Event Year-To-Date 127560.41	
City Baltimore	State MD	Zip Code 21297	Date MM / DD / YYYY 10 / 05 / 2010	
Purpose of Disbursement: Cell phone service			Transaction ID: H4.254988	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.32		307.80		362.12

<b>B. Full Name (Last, First, Middle Initial)</b> AT & T Mobility			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 536216			Allocated Activity or Event Year-To-Date 127703.93	
City Atlanta	State GA	Zip Code 30353	Date MM / DD / YYYY 10 / 05 / 2010	
Purpose of Disbursement: Cell phone service			Transaction ID: H4.254990	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.53		121.99		143.52

<b>C. Full Name (Last, First, Middle Initial)</b> City of Richmond			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address P. O. Box 26060			Allocated Activity or Event Year-To-Date 127846.13	
City Richmond	State VA	Zip Code 23274	Date MM / DD / YYYY 10 / 05 / 2010	
Purpose of Disbursement: Office utilities			Transaction ID: H4.254991	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.33		120.87		142.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
97.18		550.66		647.84

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

**A. Full Name (Last, First, Middle Initial)**  
Dominion Virginia Power

Mailing Address  
P. O. Box 26543

City	State	Zip Code	001
Richmond	VA	23290	

Purpose of Disbursement:  
Office electric utilities

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
128537.98

Date   /   /      
**Transaction ID:** H4.254992

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
103.78		588.07		691.85

**B. Full Name (Last, First, Middle Initial)**  
United Parcel Service

Mailing Address  
P. O. Box 4980

City	State	Zip Code	001
Hagerstown	MD	21747-4980	

Purpose of Disbursement:  
Shipping charge

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
128577.98

Date   /   /      
**Transaction ID:** H4.255001

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.00		34.00		40.00

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

Mailing Address  
P. O. Box 1140

City	State	Zip Code	001
Memphis	TN	38101	

Purpose of Disbursement:  
Shipping charge

Activity or Event Identifier:  
Administrative

Type of Allocated Activity:  
 Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date  
128601.79

Date   /   /      
**Transaction ID:** H4.255002

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.57		20.24		23.81

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.35		642.31		755.66

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)  
REPUBLICAN PARTY OF VIRGINIA INC

A. Full Name (Last, First, Middle Initial)  
Wachovia Bank/Richmond

Mailing Address  
1021 E. Cary St 7th Floor

City State Zip Code  
Richmond VA 23219

001

Purpose of Disbursement:  
Monthly checking account fee

Category/  
Type

Type of Allocated Activity:

- Administrative  Fundraising  Exempt  
 Voter Drive  Direct Candidate Support  
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

128615.06

Activity or Event Identifier:  
Administrative

Date MM / DD / YYYY  
10 / 12 / 2010

Transaction ID: H4.255003

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.99		11.28		13.27

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1.99		11.28		13.27

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
409.88	2322.66	2732.54