

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
BLACK REPUBLICAN PAC

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

2. **FEC IDENTIFICATION NUMBER** C00437053
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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 04 01 2008 through 06 30 2008

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 13 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
BLACK REPUBLICAN PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		8942.99
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	6973.34									
(c) Total Receipts (from Line 19)	154125.91	276404.68								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	161099.25	285347.67								
7. Total Disbursements (from Line 31)	142955.09	267203.51								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	18144.16	18144.16								
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)	107752.11									

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
BLACK REPUBLICAN PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	24788.00	41629.00
(i) Itemized (use Schedule A)	129251.08	234688.85
(ii) Unitemized	154039.08	276317.85
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	154039.08	276317.85
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)	86.83	86.83
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))	154125.91	276404.68
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	154125.91	276404.68

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

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.....	142630.09	266878.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	142630.09	266878.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
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).....	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.....	325.00	325.00
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))..	142955.09	267203.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	142955.09	267203.51

DETAILED SUMMARY PAGE
of Disbursements

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)	154039.08	276317.85
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	154039.08	276317.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	142630.09	266878.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	86.83	86.83
38. Net Operating Expenditures (subtract Line 37 from Line 36)	142543.26	266791.68

SCHEDULE A (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 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MR MAXWELL M BELDING 063

Mailing Address 28 SMITH NECK RD

City OLD LYME State CT Zip Code 06371

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
06 / 02 / 2008

Transaction ID: SA11AI.21051

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
MR JAMES A BLACK 191, JR

Mailing Address 201 W EVERGREEN AVE APT 617

City PHILADELPHIA State PA Zip Code 19118

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
05 / 16 / 2008

Transaction ID: SA11AI.18830

Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
MR JAMES A BLACK 191, JR

Mailing Address 201 W EVERGREEN AVE APT 617

City PHILADELPHIA State PA Zip Code 19118

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: MM / DD / YYYY
06 / 26 / 2008

Transaction ID: SA11AI.23631

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ► 550.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 53
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR GREGORY M BOXOLD 968

Mailing Address **838 KAAHUE ST**

City **HONOLULU** State **HI** Zip Code **96825**

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

Name of Employer **UBS FINANCIAL SERVICES** Occupation **FINANCIAL ADVISOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **05 / 14 / 2008**

Transaction ID: SA11AI.18650

Amount of Each Receipt this Period **250.00**

B.

Full Name (Last, First, Middle Initial)
MR JONATHAN D BOYER 100

Mailing Address **5 E 22ND ST APT 20C**

City **NEW YORK** State **NY** Zip Code **10010**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 21 / 2008**

Transaction ID: SA11AI.19434

Amount of Each Receipt this Period **100.00**

C.

Full Name (Last, First, Middle Initial)
MR FRANK BRADBURN 421

Mailing Address **3340 SOUTH FORK RD**

City **GLASGOW** State **KY** Zip Code **42141**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 28 / 2008**

Transaction ID: SA11AI.20508

Amount of Each Receipt this Period **250.00**

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR FRANK BRADBURN 421

Mailing Address 3340 SOUTH FORK RD

City State Zip Code
GLASGOW KY 42141

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

Name of Employer NONE Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 24 / 2008

Transaction ID: SA11AI.23458

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
MR ROBERT J CALDWELL 341

Mailing Address 1511 GALLEGH DR.

City State Zip Code
NAPLES FL 34102

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 ▼ 210.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: SA11AI.20255

Amount of Each Receipt this Period
85.00

C.

Full Name (Last, First, Middle Initial)
MR ROBERT J CALDWELL 341

Mailing Address 1511 GALLEGH DR.

City State Zip Code
NAPLES FL 34102

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 ▼ 338.00

Date of Receipt
MM / DD / YYYY
06 / 23 / 2008

Transaction ID: SA11AI.23291

Amount of Each Receipt this Period
128.00

SUBTOTAL of Receipts This Page (optional) ► **463.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 53
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
MR R M CARPENTER 197, III

Mailing Address PO BOX 732

City State Zip Code
MONTCHANIN DE 19710

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 ▼ **250.00**

Date of Receipt **06 / 12 / 2008**

Transaction ID: SA11AI.22696

Amount of Each Receipt this Period **250.00**

B.

Full Name (Last, First, Middle Initial)
MRS ELIZABETH K COCHRAN 070

Mailing Address 459 PASSAIC AVE APT 306

City State Zip Code
WEST CALDWELL NJ 07006

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **06 / 02 / 2008**

Transaction ID: SA11AI.21043

Amount of Each Receipt this Period **300.00**

C.

Full Name (Last, First, Middle Initial)
MR ROBERT P COFFIN 600

Mailing Address 916 BARCLAY CIR

City State Zip Code
LAKE FOREST IL 60045

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **05 / 19 / 2008**

Transaction ID: SA11AI.18971

Amount of Each Receipt this Period **100.00**

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) MRS SHIRLEY P COMON 902		Date of Receipt MM / DD / YYYY 05 / 22 / 2008		
	Mailing Address 457 CALLE MAYOR		Transaction ID: SA11AI.19582		
	City REDONDO BEACH	State CA	Zip Code 90277	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NONE	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 700.00			

B.	Full Name (Last, First, Middle Initial) MR EUGENE COOK 719		Date of Receipt MM / DD / YYYY 06 / 02 / 2008		
	Mailing Address 202 SHAWNEE ST		Transaction ID: SA11AI.21104		
	City HOT SPRINGS	State AR	Zip Code 71901	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer SELF EMPLOYED	Occupation RECYCLING			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

C.	Full Name (Last, First, Middle Initial) MISS ESTELLE CROCKETT 242		Date of Receipt MM / DD / YYYY 04 / 29 / 2008		
	Mailing Address 1203 1ST AVE E		Transaction ID: SA11AI.17631		
	City BIG STONE GAP	State VA	Zip Code 24219	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NONE	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1250.00			

SUBTOTAL of Receipts This Page (optional)	1450.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 53
	(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)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
KENT R DAVIS 370

Mailing Address 505 SKYHAWK PL

City State Zip Code
FRANKLIN TN 37064

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
05 / 21 / 2008

Transaction ID: SA11AI.19523

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
MR BREWSTER DURKEE 322

Mailing Address 5027 RIVER POINT RD

City State Zip Code
JACKSONVILLE FL 32207

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
06 / 23 / 2008

Transaction ID: SA11AI.23290

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MR P F N FANNING 193

Mailing Address 160 FROG HOLLOW RD

City State Zip Code
E FALLOWFIELD PA 19320

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.23762

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1100.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 53

(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR ARTHUR FISHER 486

Mailing Address 614 JEFFERSON AVE

City State Zip Code
MIDLAND MI 48640

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

Name of Employer Occupation
FISHER PROPERTY REAL ESTATE

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

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.20076

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
MR MARION M FRANK 448

Mailing Address 6948 TOWNSHIP ROAD 451

City State Zip Code
LOUDONVILLE OH 44842

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.22814

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
MR MARION M FRANK 448

Mailing Address 6948 TOWNSHIP ROAD 451

City State Zip Code
LOUDONVILLE OH 44842

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

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

Transaction ID: SA11AI.22817

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MRS FRANCES B GARDNER 281

Mailing Address 194 MALIBU RD

City MOORESVILLE State NC Zip Code 28117

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
05 / 22 / 2008

Transaction ID: SA11AI.19559

Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
MR RICHARD T GREGG 074

Mailing Address 80 TROMMEL DR

City MAHWAH State NJ Zip Code 07430

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

Name of Employer THE GREGG CO LTD Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
05 / 15 / 2008

Transaction ID: SA11AI.18708

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
MISS HELEN HENSHAW 105

Mailing Address PO BOX 189

City WACCABUC State NY Zip Code 10597

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
06 / 04 / 2008

Transaction ID: SA11AI.21585

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MR ROBERT HROMADNIK 660

Mailing Address PO BOX 562

City OSAWATOMIE State KS Zip Code 66064

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
05 / 05 / 2008

Transaction ID: SA11AI.18047

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
MR ROBERT HROMADNIK 660

Mailing Address PO BOX 562

City OSAWATOMIE State KS Zip Code 66064

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 ▼ 750.00

Date of Receipt: MM / DD / YYYY
05 / 19 / 2008

Transaction ID: SA11AI.19101

Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
MS SUSAN JOHNSON 946

Mailing Address 55 MONTICELLO AVE

City PIEDMONT State CA Zip Code 94611

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

Name of Employer SELF EMPLOYED Occupation CHEMIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
04 / 28 / 2008

Transaction ID: SA11AI.17565

Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MR PETER O JOHNSTON 100

Mailing Address 25 W 53RD ST

City NEW YORK State NY Zip Code 10019

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

Name of Employer CITIGROUP GLOBAL Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 10 / 2008

Transaction ID: SA11AI.22117

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
MS LOIS A JONES 339

Mailing Address 1425 KENSINGTON ST

City PORT CHARLOTTE State FL Zip Code 33952

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 06 / 24 / 2008

Transaction ID: SA11AI.23461

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
MR JAMES N KANNRY 339

Mailing Address 2624 COCONUT DR

City SANIBEL State FL Zip Code 33957

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

Name of Employer HYDRO PHOTON INC Occupation CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 02 / 2008

Transaction ID: SA11AI.21200

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MR JAMES N KANNRY 339

Mailing Address 2624 COCONUT DR

City State Zip Code
SANIBEL FL 33957

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

Name of Employer Occupation
HYDRO PHOTON INC CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2008

Transaction ID: SA11AI.21344

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR CURTIS KATZ 110

Mailing Address 29 BARSTOW RD STE 202

City State Zip Code
GREAT NECK NY 11021

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 10 / 2008

Transaction ID: SA11AI.21743

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR HARVEY KING 967

Mailing Address 11 AALAPAPA PL

City State Zip Code
KAILUA HI 96734

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

Name of Employer Occupation
KING & NEIL INC PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2008

Transaction ID: SA11AI.22913

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) MR DORRANCE B LANCE 083		Date of Receipt MM / DD / YYYY 05 / 21 / 2008		
	Mailing Address 438 ALLOWAY FRIESBURG RD		Transaction ID: SA11AI.19441		
	City BRIDGETON	State NJ	Zip Code 08302	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NONE	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00			

B.	Full Name (Last, First, Middle Initial) MS MARIE J LETT 760		Date of Receipt MM / DD / YYYY 04 / 25 / 2008		
	Mailing Address 3940 LETT LN		Transaction ID: SA11AI.17405		
	City BURLESON	State TX	Zip Code 76028	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00			

C.	Full Name (Last, First, Middle Initial) MR DAVID L LUKE 100, III		Date of Receipt MM / DD / YYYY 04 / 18 / 2008		
	Mailing Address 775 PARK AVE		Transaction ID: SA11AI.16436		
	City NEW YORK	State NY	Zip Code 10021	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer NONE	Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 53
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
MR ROD LUNDIN 952

Mailing Address PO BOX 2655

City State Zip Code
MURPHYS CA 95247

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
235.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2008

Transaction ID: SA11AI.18824

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
MR DAVID LUNDQUIST 334

Mailing Address 6277 N OCEAN BLVD

City State Zip Code
BOYNTON BEACH FL 33435

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1050.00

Date of Receipt
MM / DD / YYYY
04 / 29 / 2008

Transaction ID: SA11AI.17609

Amount of Each Receipt this Period
300.00

C.

Full Name (Last, First, Middle Initial)
MR WILLIAM L LUNSFORD 338

Mailing Address PO BOX 248

City State Zip Code
ONA FL 33865

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 12 / 2008

Transaction ID: SA11AI.18437

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **900.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 53
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR CHAS MCDEVITT 837

Mailing Address PO BOX 1543

City State Zip Code
BOISE ID 83701

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **04 / 24 / 2008**

Transaction ID: SA11AI.17163

Amount of Each Receipt this Period **100.00**

B.

Full Name (Last, First, Middle Initial)
MISS MARY MELTZER 139

Mailing Address 14 EDGEComb RD

City State Zip Code
BINGHAMTON NY 13905

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 ▼ **250.00**

Date of Receipt **04 / 22 / 2008**

Transaction ID: SA11AI.16681

Amount of Each Receipt this Period **250.00**

C.

Full Name (Last, First, Middle Initial)
MISS MARY MELTZER 139

Mailing Address 14 EDGEComb RD

City State Zip Code
BINGHAMTON NY 13905

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 ▼ **625.00**

Date of Receipt **05 / 22 / 2008**

Transaction ID: SA11AI.19611

Amount of Each Receipt this Period **375.00**

SUBTOTAL of Receipts This Page (optional) ► **725.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 (check only one)	PAGE 20 / 53
	<input checked="" type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial) MS MARJORIE MONAGHAN 481		Date of Receipt
Mailing Address 5140 TURTLE POINTE 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
ANN ARBOR	MI	48105
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.19539
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 1000.00
Name of Employer SILVER BELLS	Occupation RESTAURANT OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 1000.00	

B.

Full Name (Last, First, Middle Initial) MRS EVA MOORE 327		Date of Receipt
Mailing Address 2 JADE 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
EUSTIS	FL	32726
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.23475
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 100.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 250.00	

C.

Full Name (Last, First, Middle Initial) MRS GERTIE MORRIS 760		Date of Receipt
Mailing Address 307 SHADOW LN		<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
EULESS	TX	76039
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.21905
<input type="text"/> C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 400.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 550.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1500.00
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 21 / 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MR DONALD S MOSELEY 209

Mailing Address 2501 BRIGGS CHANEY RD

City State Zip Code
SILVER SPRING MD 20905

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	2	/	2	0	0	8

Transaction ID: SA11AI.18440

Amount of Each Receipt this Period
70.00

B. Full Name (Last, First, Middle Initial)
SUZANNE MURPHY 208

Mailing Address 10808 FOX HUNT LN

City State Zip Code
POTOMAC MD 20854

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	4	/	2	0	0	8

Transaction ID: SA11AI.16999

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR ROBERT NAEGELE 341

Mailing Address 7993 VIA VECCHIA

City State Zip Code
NAPLES FL 34108

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	8	/	2	0	0	8

Transaction ID: SA11AI.20265

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **570.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 53

(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MS IRENE NEALE 970

Mailing Address 8325 SW MOHAWK ST APT 119

City State Zip Code
TUALATIN OR 97062

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.20698

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
MR HENRY ODEGARD 974

Mailing Address 89518 FIR BUTTE RD

City State Zip Code
EUGENE OR 97402

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

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

Transaction ID: SA11AI.22185

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
AUDREY J OPULSKI 857

Mailing Address 8556 N CORAL RIDGE LOOP

City State Zip Code
TUCSON AZ 85704

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

Name of Employer Occupation
NONE RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: SA11AI.21283

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 53

(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR JOHN A PAGIN 467

Mailing Address PO BOX 86

City State Zip Code
HOWE IN 46746

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
06 / 16 / 2008

Transaction ID: SA11AI.22795

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
MISS EDITH P PALMER 109

Mailing Address 282 LAROE RD

City State Zip Code
CHESTER NY 10918

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
04 / 24 / 2008

Transaction ID: SA11AI.16980

Amount of Each Receipt this Period 150.00

C.

Full Name (Last, First, Middle Initial)
SUZANNE A PALMER 980

Mailing Address 108 S 300TH PL

City State Zip Code
FEDERAL WAY WA 98003

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 ▼ 2000.00

Date of Receipt MM / DD / YYYY
06 / 10 / 2008

Transaction ID: SA11AI.21927

Amount of Each Receipt this Period 2000.00

SUBTOTAL of Receipts This Page (optional) 2250.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MR NICHOLAS PEAY 441, JR

Mailing Address 2965 FAIRMOUNT BLVD

City CLEVELAND HEIGHTS State OH Zip Code 44118

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 ▼ 250.00

Date of Receipt: 05 / 28 / 2008
Transaction ID: SA11AI.20293
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
MR TOMMIE PLUMMER 761

Mailing Address 4916 CATON DR

City FORT WORTH State TX Zip Code 76180

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 28 / 2008
Transaction ID: SA11AI.20669
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
MR MAURICE J REESE 537

Mailing Address 713 LAKEWOOD BLVD

City MADISON State WI Zip Code 53704

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 16 / 2008
Transaction ID: SA11AI.22861
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 53
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR DELBERT R ROBINSON 882

Mailing Address 801 ALABAMA ST

City State Zip Code
LAKE ARTHUR NM 88253

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 ▼ **270.00**

Date of Receipt
MM / DD / YYYY
06 / 23 / 2008

Transaction ID: SA11AI.23311

Amount of Each Receipt this Period
70.00

B.

Full Name (Last, First, Middle Initial)
MR STANFORD Z ROTHSCHILD 212

Mailing Address 1122 KENILWORTH DR
THE EXCHANGE- SUITE 317

City State Zip Code
TOWSON MD 21204

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

Name of Employer ROTHSCHILD CAPITAL MGMT Occupation **CHAIRMAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
04 / 22 / 2008

Transaction ID: SA11AI.16604

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
PAT R RUTHERFORD 770

Mailing Address 5 E GREENWAY PLZ STE 220

City State Zip Code
HOUSTON TX 77046

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

Name of Employer RUTHERFORD OIL CORP Occupation **OWNER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: SA11AI.20419

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1570.00**

TOTAL This Period (last page this line 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 26 / 53
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MR FRED W SCHEIGERT 223

Mailing Address 123 S PITT ST

City State Zip Code
ALEXANDRIA VA 22314

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.16831

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR ALLEN H SIMON 852

Mailing Address 1383 N CRISS ST

City State Zip Code
CHANDLER AZ 85226

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.17256

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR WILLIAM B SNYDER 337

Mailing Address 555 5TH AVE NE PH 2

City State Zip Code
ST PETERSBURG FL 33701

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

Name of Employer NONE Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.21020

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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

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

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

FOR LINE NUMBER: PAGE 27 / 53

(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
MR WILLIAM STEELE 270

Mailing Address 336 HOLLYBROOK DR

City State Zip Code
ADVANCE NC 27006

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

Name of Employer Occupation
NONE RETIRED

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	0	8

Transaction ID: SA11AI.16602

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MR CAMPBELL STEWARD 019

Mailing Address 65 ASBURY ST

City State Zip Code
TOPSFIELD MA 01983

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

Name of Employer Occupation
KONA CORP TREASURER

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

Date of Receipt

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

Transaction ID: SA11AI.22111

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
MR HARRY STOUT 479

Mailing Address 1142 CHERRY LN

City State Zip Code
WEST LAFAYETTE IN 47906

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	8

Transaction ID: SA11AI.18403

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
ADA ANDERSON STRASENBURGH 082
Mailing Address PO BOX 608

City State Zip Code
OCEAN VIEW NJ 08230

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: SA11AI.18107

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
ADA ANDERSON STRASENBURGH 082
Mailing Address PO BOX 608

City State Zip Code
OCEAN VIEW NJ 08230

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
06 / 11 / 2008

Transaction ID: SA11AI.22241

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
BEVERLY N SULLIVAN 271
Mailing Address 125 HAGEN CT

City State Zip Code
WINSTON SALEM NC 27106

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt
MM / DD / YYYY
05 / 16 / 2008

Transaction ID: SA11AI.18732

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 400.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 53
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MR GEORGE W SUTER 336
Mailing Address 8506 N HYALEAH RD
City Tampa State FL Zip Code 33617
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 05 / 19 / 2008
Transaction ID: SA11AI.18851
Amount of Each Receipt this Period 20.00

B. Full Name (Last, First, Middle Initial)
MR TIRKHAM VEALE 440, II
Mailing Address 1700 EPPING RD
City GATES MILLS State OH Zip Code 44040
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 05 / 27 / 2008
Transaction ID: SA11AI.20220
Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial)
MR LEROY WEBER 945, JR
Mailing Address PO BOX 355
City RIO VISTA State CA Zip Code 94571
FEC ID number of contributing federal political committee. **C**
Name of Employer NONE Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00
Date of Receipt 06 / 23 / 2008
Transaction ID: SA11AI.23440
Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 370.00
TOTAL This Period (last page this line 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 30 / 53
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
MRS L J WHITMEYER 759, JR

Mailing Address HC 1 BOX 110

City COLMESNEIL State TX Zip Code 75938

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: MM / DD / YYYY
05 / 28 / 2008

Transaction ID: SA11AI.20346

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
MRS L J WHITMEYER 759, JR

Mailing Address HC 1 BOX 110

City COLMESNEIL State TX Zip Code 75938

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 540.00

Date of Receipt: MM / DD / YYYY
06 / 03 / 2008

Transaction ID: SA11AI.21416

Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
MR SAMUEL J WIEGAND 895

Mailing Address 6584 CHAMPETRE CT

City RENO State NV Zip Code 89511

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

Name of Employer NONE Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: MM / DD / YYYY
04 / 29 / 2008

Transaction ID: SA11AI.17799

Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **790.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 53
(check only one)

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

A.

Full Name (Last, First, Middle Initial)
MR ROBERT ZINSER 921

Mailing Address 3158 ORLEANS E

City State Zip Code
SAN DIEGO CA 92110

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

Name of Employer Occupation
NONE RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.19369

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	24788.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) BMW DIRECT INC	Transaction ID: SB21B.16205
	Mailing Address 1155 - 15TH STREET NW SUITE 410	Date of Disbursement 05 / 28 / 2008
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period 2663.94
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	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) BMW DIRECT INC	Transaction ID: SB21B.16206
	Mailing Address 1155 - 15TH STREET NW SUITE 410	Date of Disbursement 06 / 05 / 2008
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period 3337.05
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	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) ▼

C.	Full Name (Last, First, Middle Initial) BMW DIRECT INC	Transaction ID: SB21B.16207
	Mailing Address 1155 - 15TH STREET NW SUITE 410	Date of Disbursement 06 / 11 / 2008
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period 14.31
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

6015.30

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) BMW DIRECT INC	Transaction ID: SB21B.16208 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</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>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	8		2	0	0	8												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	<table border="1"><tr><td>5527.06</td></tr></table>	5527.06																		
5527.06																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					

B.	Full Name (Last, First, Middle Initial) BMW DIRECT INC	Transaction ID: SB21B.16209 Date of Disbursement																			
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	5		2	0	0	8												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	<table border="1"><tr><td>3129.46</td></tr></table>	3129.46																		
3129.46																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					

C.	Full Name (Last, First, Middle Initial) CARDINAL PRESS	Transaction ID: SB21B.16212 Date of Disbursement																			
	Mailing Address 218 INDUSTRIAL DR	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	4		2	0	0	8												
	City FREDERICKS State VA Zip Code 22408	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	<table border="1"><tr><td>3555.00</td></tr></table>	3555.00																		
3555.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>12211.52</td></tr></table>	12211.52
12211.52		
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)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
CENTURY DATA MAILING SERVICES

Transaction ID: SB21B.16250
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW
SUITE 410

/ /

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
DIRECT MAIL FUNDRAISING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
CENTURY DATA MAILING SERVICES

Transaction ID: SB21B.16251
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW
SUITE 410

/ /

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
DIRECT MAIL FUNDRAISING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
CENTURY DATA MAILING SERVICES

Transaction ID: SB21B.16252
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW
SUITE 410

/ /

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
DIRECT MAIL FUNDRAISING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.16253 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	<input type="text" value="5076.36"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.16254 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	<input type="text" value="9000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.16255 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	<input type="text" value="4418.72"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="003"/> Category/ Type
	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="18495.08"/>
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)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES Mailing Address 1155 - 15TH STREET NW SUITE 410 City WASHINGTON State DC Zip Code 20005 Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.16256 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 8	Amount of Each Disbursement this Period 6968.40
B.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES Mailing Address 1155 - 15TH STREET NW SUITE 410 City WASHINGTON State DC Zip Code 20005 Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.16257 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 8	Amount of Each Disbursement this Period 1910.27
C.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES Mailing Address 1155 - 15TH STREET NW SUITE 410 City WASHINGTON State DC Zip Code 20005 Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.16258 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 8	Amount of Each Disbursement this Period 16126.08

SUBTOTAL of Disbursements This Page (optional)	25004.75
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.16259 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 6393.94
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City WASHINGTON State DC Zip Code 20005	
Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	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) CENTURY DATA SYSTEMS	Transaction ID: SB21B.16214 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 2090.42
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City WASHINGTON State DC Zip Code 20005	
Purpose of Disbursement DATA PROCESSING Candidate Name	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) CENTURY DATA SYSTEMS	Transaction ID: SB21B.16215 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 8
	Amount of Each Disbursement this Period 620.00
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City WASHINGTON State DC Zip Code 20005	
Purpose of Disbursement DATA PROCESSING Candidate Name	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) ▶	9104.36
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) COLORTREE <hr/> Mailing Address 2519 BRITTONS HILL RD <hr/> City RICHMOND State VA Zip Code 23230 <hr/> Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.16217 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">3935.93</div>
B.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE <hr/> Mailing Address 504 SHAW ROAD SUITE 206 <hr/> City STERLING State VA Zip Code 20166 <hr/> Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.16219 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">2500.00</div>
C.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE <hr/> Mailing Address 504 SHAW ROAD SUITE 206 <hr/> City STERLING State VA Zip Code 20166 <hr/> Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.16220 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 5px; text-align: center;">10605.50</div>

SUBTOTAL of Disbursements This Page (optional) ▶	<div style="border: 1px solid black; padding: 5px; font-weight: bold;">17041.43</div>
TOTAL This Period (last page this line number only) ▶	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.16221
	Mailing Address 504 SHAW ROAD SUITE 206	Date of Disbursement 05 / 14 / 2008
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period 2518.34
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	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) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.16222
	Mailing Address 504 SHAW ROAD SUITE 206	Date of Disbursement 05 / 21 / 2008
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period 1241.15
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	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) ▼

C.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.16223
	Mailing Address 504 SHAW ROAD SUITE 206	Date of Disbursement 06 / 25 / 2008
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period 3500.00
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	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) ▼

SUBTOTAL of Disbursements This Page (optional)	7259.49
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) ELECTRONIC REPORTING SYSTEMS INC	Transaction ID: SB21B.16225
	Mailing Address 683 BERRYVILLE AVE	Date of Disbursement MM / DD / YYYY 06 / 25 / 2008
	City WINCHESTER State VA Zip Code 22601	Amount of Each Disbursement this Period 1361.80
	Purpose of Disbursement ELECTRONIC DISCLOSURE REPORTING	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.16262
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement MM / DD / YYYY 04 / 02 / 2008
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 186.18
	Purpose of Disbursement MERCHANT SERVICE CHARGE	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.16263
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement MM / DD / YYYY 04 / 30 / 2008
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 77.32
	Purpose of Disbursement MONTHLY SERVICE CHARGE	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1625.30
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.16264 Date of Disbursement																			
	Mailing Address 11325 RANDOM HILLS DR	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		3	0		2	0	0	8												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement AMEX DISCOUNT FEE	<table border="1"><tr><td>7.16</td></tr></table>	7.16																		
7.16																					
	Candidate Name	<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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.16265 Date of Disbursement																			
	Mailing Address 11325 RANDOM HILLS DR	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	2		2	0	0	8												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MERCHANT SERVICE CHARGE	<table border="1"><tr><td>71.10</td></tr></table>	71.10																		
71.10																					
	Candidate Name	<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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.16266 Date of Disbursement																			
	Mailing Address 11325 RANDOM HILLS DR	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		3	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		3	0		2	0	0	8												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MONTHLY SERVICE CHARGE	<table border="1"><tr><td>172.94</td></tr></table>	172.94																		
172.94																					
	Candidate Name	<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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>251.20</td></tr></table>	251.20
251.20		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

<p>A. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX DISCOUNT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <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.16267</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="31"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.75"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement MERCHANT SERVICE CHARGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <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.16269</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="03"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="154.82"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX DISCOUNT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <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.16268</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="30"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="58.05"/></p> <p><input type="text" value="001"/> Category/Type</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="230.62"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

<p>A. Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement MONTHLY SERVICE CHARGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <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.16270</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="30"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="171.79"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) LEGACY LISTS INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement LIST RENTALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <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.16227</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="28"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3726.46"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p>C. Full Name (Last, First, Middle Initial) LEGACY LISTS INC</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement LIST RENTALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <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.16228</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="05"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6310.74"/></p> <p>Category/Type: <input type="text" value="003"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) LEGACY LISTS INC	Transaction ID: SB21B.16229
	Mailing Address 1155 - 15TH STREET NW SUITE 410	Date of Disbursement MM / DD / YYYY 06 / 18 / 2008
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period 10145.44
	Purpose of Disbursement LIST RENTALS Candidate Name	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) LEGACY LISTS INC	Transaction ID: SB21B.16230
	Mailing Address 1155 - 15TH STREET NW SUITE 410	Date of Disbursement MM / DD / YYYY 06 / 18 / 2008
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period 1828.48
	Purpose of Disbursement LIST RENTALS Candidate Name	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) ▼

C.	Full Name (Last, First, Middle Initial) MACKENZIE & COMPANYY	Transaction ID: SB21B.16234
	Mailing Address 3464 S UTAH ST	Date of Disbursement MM / DD / YYYY 05 / 28 / 2008
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 750.00
	Purpose of Disbursement CONSULTING - COMPLIANCE Candidate Name	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)	▶	12723.92
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

PAGE 45 / 53

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) MACKENZIE & COMPANY	Transaction ID: SB21B.16235 Date of Disbursement
	Mailing Address 3464 S UTAH ST	<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING - COMPLIANCE Candidate Name	<input type="text" value="750.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

B.	Full Name (Last, First, Middle Initial) MACKENZIE & COMPANY	Transaction ID: SB21B.16236 Date of Disbursement
	Mailing Address 3464 S UTAH ST	<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period
	Purpose of Disbursement CONSULTING - COMPLIANCE Candidate Name	<input type="text" value="750.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

C.	Full Name (Last, First, Middle Initial) PATTON-KIEHL GROUP	Transaction ID: SB21B.16239 Date of Disbursement
	Mailing Address PO BOX 590	<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City THORNBURG State VA Zip Code 22565	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name	<input type="text" value="2789.32"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="003"/> Category/Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4289.32"/>
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)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) THE LEGACY PROJECT INC <hr/> Mailing Address 1155 - 15TH STREET NW SUITE 410 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement CONSULTING - HIGH DOLLAR FUNDRAISING Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.16242 Date of Disbursement 06 / 05 / 2008 <hr/> Amount of Each Disbursement this Period 1500.00
B.	Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU <hr/> Mailing Address 4128 PEPSI PLACE <hr/> City CHANTILLY State VA Zip Code 20151 <hr/> Purpose of Disbursement CAGING & ESCROW SERVICES Candidate Name 001 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.16244 Date of Disbursement 04 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 1354.89
C.	Full Name (Last, First, Middle Initial) WASHINGTON INTELLIGENCE BUREAU <hr/> Mailing Address 4128 PEPSI PLACE <hr/> City CHANTILLY State VA Zip Code 20151 <hr/> Purpose of Disbursement CAGING & ESCROW SERVICES Candidate Name 001 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.16245 Date of Disbursement 05 / 21 / 2008 <hr/> Amount of Each Disbursement this Period 1866.79

SUBTOTAL of Disbursements This Page (optional) ▶	4721.68
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial)
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
CAGING & ESCROW SERVICES

Candidate Name

001
Category/
Type

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

Transaction ID: SB21B.16246
Date of Disbursement

06 / 05 / 2008

Amount of Each Disbursement this Period

1646.88

B. Full Name (Last, First, Middle Initial)
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
CAGING & ESCROW SERVICES

Candidate Name

001
Category/
Type

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

Transaction ID: SB21B.16247
Date of Disbursement

06 / 12 / 2008

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
CAGING & ESCROW SERVICES

Candidate Name

001
Category/
Type

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

Transaction ID: SB21B.16248
Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

1408.19

SUBTOTAL of Disbursements This Page (optional) ▶

4055.07

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

142630.09

**SCHEDULE 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 48 / 53

<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)
BLACK REPUBLICAN PAC

A.

Full Name (Last, First, Middle Initial)
CITIZENS FOR DOGAN

Transaction ID: SB29.16261

Date of Disbursement

Mailing Address PO BOX 3741

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	8

City State Zip Code
BALLWIN MO 63022

Amount of Each Disbursement this Period

325.00

Purpose of Disbursement
CONTRIBUTION - STATE REPRESENTATIVE

012
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

325.00

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

325.00

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)
BLACK REPUBLICAN PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AVALANCHE SERVICES			Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 53 MCGARRY BLVD			
City KEARNYSVILLE	State WV	ZIP Code 25430	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.16210	
Amount Incurred This Period <input type="text" value="5332.50"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5332.50"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="16370.00"/>		Transaction ID: SD10.4113	
Amount Incurred This Period <input type="text" value="21096.94"/>	Payment This Period <input type="text" value="14671.82"/>	Outstanding Balance at Close of This Period <input type="text" value="22795.12"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CARDINAL PRESS			Nature of Debt (Purpose): DIRECT MAIL PAC FUNDRAISING FOR BRP
Mailing Address 218 INDUSTRIAL DR			
City FREDERICKS	State VA	ZIP Code 22408	

Outstanding Balance Beginning This Period <input type="text" value="3555.00"/>		Transaction ID: SD10.16197	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3555.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="28127.62"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) 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)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

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

Outstanding Balance Beginning This Period 14468.42	Transaction ID: SD10.4119	
Amount Incurred This Period 67484.60	Payment This Period 59285.83	Outstanding Balance at Close of This Period 22667.19

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

Outstanding Balance Beginning This Period 7503.58	Transaction ID: SD10.4114	
Amount Incurred This Period 3333.22	Payment This Period 2710.42	Outstanding Balance at Close of This Period 8126.38

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor COLORTREE	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING FOR BRPAC
Mailing Address 2519 BRITTONS HILL RD	
City State ZIP Code RICHMOND VA 23230	

Outstanding Balance Beginning This Period 3935.93	Transaction ID: SD10.4115	
Amount Incurred This Period 11086.95	Payment This Period 3935.93	Outstanding Balance at Close of This Period 11086.95

1) SUBTOTALS This Period This Page (optional).....	▶	41880.52
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)
BLACK REPUBLICAN PAC

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

Outstanding Balance Beginning This Period 16864.99	Transaction ID: SD10.4116	
Amount Incurred This Period 12111.94	Payment This Period 20364.99	Outstanding Balance at Close of This Period 8611.94

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

Outstanding Balance Beginning This Period 1361.80	Transaction ID: SD10.16199	
Amount Incurred This Period 1653.80	Payment This Period 1361.80	Outstanding Balance at Close of This Period 1653.80

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor INTEGRAM	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 8421 HILLTOP RD	
City State ZIP Code FAIRFAX VA 22031	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.16231	
Amount Incurred This Period 3247.01	Payment This Period 0.00	Outstanding Balance at Close of This Period 3247.01

1) SUBTOTALS This Period This Page (optional).....	13512.75
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)
BLACK REPUBLICAN PAC

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

Outstanding Balance Beginning This Period 25969.84	Transaction ID: SD10.4117	
Amount Incurred This Period 9925.00	Payment This Period 22011.12	Outstanding Balance at Close of This Period 13883.72

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

Outstanding Balance Beginning This Period 2250.00	Transaction ID: SD10.4118	
Amount Incurred This Period 2250.00	Payment This Period 2250.00	Outstanding Balance at Close of This Period 2250.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MDI IMAGING & MAIL	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 21721-A FILIGREE CT	
City State ZIP Code ASHBURN VA 20147	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.16237	
Amount Incurred This Period 3445.94	Payment This Period 0.00	Outstanding Balance at Close of This Period 3445.94

1) SUBTOTALS This Period This Page (optional).....	▶	19579.66
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)
BLACK REPUBLICAN PAC

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

Outstanding Balance Beginning This Period 2789.32		Transaction ID: SD10.4120	
Amount Incurred This Period 0.00	Payment This Period 2789.32	Outstanding Balance at Close of This Period 0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE LEGACY PROJECT INC			Nature of Debt (Purpose): CONSULTING - HIGH DOLLAR FUNDRAISING
Mailing Address 1155 - 15TH STREET NW SUITE 410			
City WASHINGTON	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period 0.00		Transaction ID: SD10.16240	
Amount Incurred This Period 3000.00	Payment This Period 1500.00	Outstanding Balance at Close of This Period 1500.00	

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

Outstanding Balance Beginning This Period 4868.56		Transaction ID: SD10.4121	
Amount Incurred This Period 5559.75	Payment This Period 7276.75	Outstanding Balance at Close of This Period 3151.56	

1) SUBTOTALS This Period This Page (optional).....	▶	4651.56
2) TOTALS This Period (last page this line number only).....	▶	107752.11
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	107752.11