

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

BLACK REPUBLICAN PAC

ADDRESS (number and street) 2776 S ARLINGTON MILL DR #806

Check if different than previously reported. (ACC) ARLINGTON VA 22206

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

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

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|---|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on 11 / 04 / 2014 in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on / / in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 2014

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 SCOTT B MACKENZIE [Electronically Filed] Date 10 / 20 / 2014

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 | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

BLACK REPUBLICAN PAC

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | <input type="text" value="12945.93"/> | <input type="text" value="12945.93"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="26476.18"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="873.00"/> | <input type="text" value="295921.58"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="27349.18"/> | <input type="text" value="308867.51"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="25866.99"/> | <input type="text" value="307385.32"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="1482.19"/> | <input type="text" value="1482.19"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="125343.01"/> | |

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

BLACK REPUBLICAN PAC

Report Covering the Period: From: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 250.00 | 59247.60 |
| (ii) Unitemized | 623.00 | 233347.98 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 873.00 | 292595.58 |
| (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) | 873.00 | 292595.58 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 3326.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (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))..... ▶ | 873.00 | 295921.58 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 873.00 | 295921.58 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated 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 | 25866.99 | 283385.32 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 25866.99 | 283385.32 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 18000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (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 | 0.00 | 6000.00 |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated 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)) .. | 25866.99 | 307385.32 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 25866.99 | 307385.32 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 873.00 | 292595.58 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 873.00 | 292595.58 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 25866.99 | 283385.32 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 3326.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 25866.99 | 280059.32 |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 OF 14
(check only one)

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

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

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)
A. M HOOK 380

Mailing Address 2506 BONICORD RD

| | | |
|-------------------|-------------|-------------------|
| City DYERSBURG | State TN | Zip Code 38024 |
|-------------------|-------------|-------------------|

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 M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 09 | / | 2014 |

Transaction ID : SA11AI.15466

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. MR JAMES E LAIN 926

Mailing Address PO BOX 1939

| | | |
|--------------------------|-------------|-------------------|
| City HUNTINGTON BEACH | State CA | Zip Code 92647 |
|--------------------------|-------------|-------------------|

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 ▼
600.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 10 | / | 01 | / | 2014 |

Transaction ID : SA11AI.15470

Amount of Each Receipt this Period
200.00

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

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
|------------------|------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
|-------|---|-------|---|-------------|

Amount of Each Receipt this Period

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 250.00 |
| TOTAL This Period (last page this line number only).....▶ | 250.00 |

**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

Full Name (Last, First, Middle Initial)

A. CENTURY DATA MAILING SERVICES

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAC DIRECT MAIL - FINANCE CHARGE

003

Candidate Name
BLACK REPUBLICAN PAC

Category/
Type

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

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : **SB21B.15489**

Amount of Each Disbursement this Period

73.71

Full Name (Last, First, Middle Initial)

B. CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
PAC DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name
BLACK REPUBLICAN PAC

Category/
Type

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

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : **SB21B.15490**

Amount of Each Disbursement this Period

3603.60

Full Name (Last, First, Middle Initial)

C. EDWARD J COUSAR

Mailing Address 206 OLD FRIENDSHIP RD

City CATAWBA State SC Zip Code 29704

Purpose of Disbursement
CONSULTING - PAC MANAGEMENT

001

Candidate Name
BLACK REPUBLICAN PAC

Category/
Type

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

Date of Disbursement

MM / DD / YYYY
10 / 03 / 2014

Transaction ID : **SB21B.15488**

Amount of Each Disbursement this Period

1000.00

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

4677.31

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
SERVICE CHARGE

Category/
Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.15483

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

Category/
Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.15484

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

Category/
Type

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

/ /

Transaction ID : SB21B.15485

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
CUSTOM CREDIT BILLING

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 06 / 2014

Transaction ID : **SB21B.15486**

Amount of Each Disbursement this Period

28.50

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
MERCHANT SERVICE CHARGE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2014

Transaction ID : **SB21B.15487**

Amount of Each Disbursement this Period

92.19

Full Name (Last, First, Middle Initial)

C. LEGACY LIST MARKETING INC

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City State Zip Code
WASHINGTON DC 20005

Purpose of Disbursement
PAC DIRECT MAIL - LIST RENTALS

003

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : **SB21B.15491**

Amount of Each Disbursement this Period

16787.84

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

16908.53

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANY

Mailing Address 2776 S ARLINGTON MILL DR #806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 09 / 2014

Transaction ID : SB21B.15493

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. SIMPKINS ESCROW LLC

Mailing Address 29243 ST JUST DR

City UNIONVILLE State VA Zip Code 22567

Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

BLACK REPUBLICAN PAC

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 09 / 2014

Transaction ID : SB21B.15492

Amount of Each Disbursement this Period

264.98

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

4264.98

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

25866.99

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **BLACK REPUBLICAN PAC** Transaction ID : SC/10.7797

| | |
|---|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) SCOTT B MACKENZIE | Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 2776 S ARLINGTON MILL DR #806 | |
| City ARLINGTON State VA ZIP Code 22206 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 350.00 | 0.00 | 350.00 |

TERMS

| | | | |
|----------------|-------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| 10 / 09 / 2012 | UPON DEMAND | 18.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|---|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |

| | |
|---|----------------------|
| SUBTOTALS This Period This Page (optional).....▶ | 350.00 |
| TOTALS This Period (last page in this line only).....▶ | <input type="text"/> |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary. | |

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **BLACK REPUBLICAN PAC** Transaction ID : SC/10.7799

| | |
|---|---|
| LOAN SOURCE Full Name (Last, First, Middle Initial) SCOTT B MACKENZIE | Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| Mailing Address 2776 S ARLINGTON MILL DR #806 | |
| City ARLINGTON State VA ZIP Code 22206 | |

| | | |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 40.03 | 0.00 | 40.03 |

TERMS

| | | | |
|----------------|-------------|---------------|---|
| Date Incurred | Date Due | Interest Rate | Secured: |
| 04 / 04 / 2013 | UPON DEMAND | 18.00 % (apr) | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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

| | |
|--|---|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer |
| Mailing Address | Occupation |
| City State ZIP Code | Amount Guaranteed Outstanding: <input type="text"/> |

| | |
|---|--------|
| SUBTOTALS This Period This Page (optional).....▶ | 40.03 |
| TOTALS This Period (last page in this line only).....▶ | 390.03 |

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 13 OF 14 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor BASE CONNECT INC | Nature of Debt (Purpose): DIRECT MAIL - CREATIVE |
| Mailing Address 1155 - 15TH STREET NW SUITE 410 | |
| City State Zip Code WASHINGTON DC 20005 | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period 46158.38 | Transaction ID : SD10.4120 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 46158.38 |

| | |
|--|--|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CENTURY DATA SYSTEMS CORP | 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 29417.32 | Transaction ID : SD10.4121 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 29417.32 |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CONSOLIDATED MAILING SERVICES | Nature of Debt (Purpose): DIRECT MAIL - PRINTING & MAILSHOP |
| Mailing Address 504 SHAW RD SUITE 206 | |
| City State Zip Code STERLING VA 20166 | |

| | | |
|---|-----------------------------------|---|
| Outstanding Balance Beginning This Period 39245.91 | Transaction ID : SD10.4122 | |
| Amount Incurred This Period 0.00 | Payment This Period 3603.60 | Outstanding Balance at Close of This Period 35642.31 |

| | |
|--|----------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | 11218.01 |
| 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) | PAGE 14 OF 14 |
| | FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

| | |
|---|--|
| A. 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 20005 | |

| | | |
|--|-----------------------------|--|
| Outstanding Balance Beginning This Period 3476.20 | Transaction ID : SD10.4123 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 3476.20 |

| | |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LEGACY LIST MARKETING INC | Nature of Debt (Purpose): DIRECT MAIL - LIST RENTALS |
| Mailing Address 1155 - 15TH STREET NW SUITE 410 | |
| City State Zip Code WASHINGTON DC 20005 | |

| | | |
|---|---------------------------------|--|
| Outstanding Balance Beginning This Period 23046.61 | Transaction ID : SD10.4124 | |
| Amount Incurred This Period 0.00 | Payment This Period 16787.84 | Outstanding Balance at Close of This Period 6258.77 |

| | |
|--|--|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor MACKENZIE & COMPANY | Nature of Debt (Purpose): CONSULTING - COMPLIANCE |
| Mailing Address 2776 S ARLINGTON MILL DR #806 | |
| City State Zip Code ARLINGTON VA 22206 | |

| | | |
|--|--------------------------------|--|
| Outstanding Balance Beginning This Period 8000.00 | Transaction ID : SD10.4125 | |
| Amount Incurred This Period 0.00 | Payment This Period 4000.00 | Outstanding Balance at Close of This Period 4000.00 |

| | |
|--|-----------|
| 1) SUBTOTALS This Period This Page (optional)..... ▶ | 13734.97 |
| 2) TOTALS This Period (last page this line number only)..... ▶ | 124952.98 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶ | 390.03 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶ | 125343.01 |