

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) PO BOX 96613
Check if different than previously reported. (ACC) WASHINGTON DC 20090-6613

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00437053 3. IS THIS REPORT NEW (N) OR AMENDED (A) 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:
 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 (12S)
Election on 11 / 02 / 2010 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 10 / 01 / 2010 through 10 / 13 / 2010

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 04 / 11 / 2012

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

**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="2010"/>		23312.90
(b) Cash on Hand at Beginning of Reporting Period.....	3417.82	
(c) Total Receipts (from Line 19)	31901.02	395500.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	35318.84	418813.89
7. Total Disbursements (from Line 31).....	5909.67	389404.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	29409.17	29409.17
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)	89943.27	

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).....	5405.00	78873.16
(ii) Unitemized	26496.02	316627.83
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	31901.02	395500.99
(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)	31901.02	395500.99
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))..... ▶	31901.02	395500.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	31901.02	395500.99

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	5909.67	363904.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5909.67	363904.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	25500.00
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	0.00
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)) ..	5909.67	389404.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5909.67	389404.72

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)	31901.02	395500.99
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	31901.02	395500.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5909.67	363904.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5909.67	363904.72

**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 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 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

A. MRS ELIZABETH K COCHRAN 070
 Full Name (Last, First, Middle Initial)
 Mailing Address 459 PASSAIC AVE APT 306
 City WEST CALDWELL State NJ Zip Code 07006
 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 ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2010
Transaction ID : SA11AI.98556
 Amount of Each Receipt this Period
 1500.00

B. KEVIN M COLLINS 857
 Full Name (Last, First, Middle Initial)
 Mailing Address 8859 N HERSEY WAY
 City TUCSON State AZ Zip Code 85742
 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 Y Y
 10 / 07 / 2010
Transaction ID : SA11AI.98562
 Amount of Each Receipt this Period
 300.00

C. KENT R DAVIS 370
 Full Name (Last, First, Middle Initial)
 Mailing Address 505 SKYHAWK PL
 City FRANKLIN State TN Zip Code 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
 M M / D D / Y Y Y Y Y Y
 10 / 07 / 2010
Transaction ID : SA11AI.98611
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 2300.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 7 OF 18
(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. MRS MARTHA A DUNN 940
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 KINGS MOUNTAIN RD
 City State Zip Code
 WOODSIDE CA 94062
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2010
Transaction ID : SA11AI.98680
 Amount of Each Receipt this Period
 250.00

B. MRS FRANCES HARRELL 325
 Full Name (Last, First, Middle Initial)
 Mailing Address 2660 MAGNOLIA AVE
 City State Zip Code
 PENSACOLA FL 32503
 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 ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2010
Transaction ID : SA11AI.98888
 Amount of Each Receipt this Period
 200.00

C. FLOYD A HICKS 960
 Full Name (Last, First, Middle Initial)
 Mailing Address 225 GILMORE RD
 City State Zip Code
 RED BLUFF CA 96080
 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 ▼
 215.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 12 / 2010
Transaction ID : SA11AI.98934
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 480.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 8 OF 18
(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. MR JAMES JAKOBEK 024
 Full Name (Last, First, Middle Initial)
 Mailing Address 50 BURR DR
 City NEEDHAM State MA Zip Code 02492
 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 Y Y
 10 / 11 / 2010
Transaction ID : SA11AI.99013
 Amount of Each Receipt this Period
 250.00

B. MR ALLAN W LUND 548
 Full Name (Last, First, Middle Initial)
 Mailing Address 15025 W BECKWITH RD
 City HAYWARD State WI Zip Code 54843
 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
 M M / D D / Y Y Y Y Y Y
 10 / 11 / 2010
Transaction ID : SA11AI.99215
 Amount of Each Receipt this Period
 400.00

C. CHARLES MATTHEWS 600
 Full Name (Last, First, Middle Initial)
 Mailing Address 321 GRAND AVE
 City WAUKEGAN State IL Zip Code 60085
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MATTHEWS EMPLOYMENT INC Occupation BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 12 / 2010
Transaction ID : SA11AI.99245
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1150.00
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 OF 18
	(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"/> 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

Full Name (Last, First, Middle Initial) A. MR WILLIAM J MYHRE 973		Date of Receipt
Mailing Address 865 2ND AVE		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
City	State	Zip Code
SWEET HOME	OR	97386
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.99348
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="200.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. MR ELIJAH RAMSEY 705 III		Date of Receipt
Mailing Address 207 KEES CIR		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
City	State	Zip Code
LAFAYETTE	LA	70506
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.99471
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="250.00"/>
Name of Employer	Occupation	
US GOVT	RESEARCHER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MR DONALD RIKARD 765		Date of Receipt
Mailing Address PO BOX 871		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
City	State	Zip Code
LAMPASAS	TX	76550
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.99511
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
NONE	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="600.00"/>
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 10 OF 18
(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. MR EDWIN SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 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 M / D D D / Y Y Y Y Y Y
 10 / 05 / 2010
Transaction ID : SA11AI.99570
 Amount of Each Receipt this Period
 150.00

B. MR EDWIN SANDHAM 349
 Full Name (Last, First, Middle Initial)
 Mailing Address 1964 SW SAINT ANDREWS DR
 City PALM CITY State FL Zip Code 34990
 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 ▼ 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 13 / 2010
Transaction ID : SA11AI.99571
 Amount of Each Receipt this Period
 225.00

C. JOHN SIAS 941
 Full Name (Last, First, Middle Initial)
 Mailing Address 1100 SACRAMENTO ST APT 1002
 City SAN FRANCISCO State CA Zip Code 94108
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRONICLE PUBLISHING INC Occupation PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2010
Transaction ID : SA11AI.99646
 Amount of Each Receipt this Period
 350.00

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: PAGE 11 OF 18
(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 C E TOWNSEND 241 III

Mailing Address 2260 TRUEVINE RD

City State Zip Code
PENHOOK VA 24137

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 Y Y
 10 / 04 / 2010
Transaction ID : SA11AI.99788

Amount of Each Receipt this Period
150.00

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	5405.00

**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. ADKINS EXPOSURES

Mailing Address 1308 RHODE ISLAND AVE NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
WEBSITE / BLOG

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.99977

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. MR EDWARD J COUSAR

Mailing Address PO BOX 96613

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
CONSULTING - MANAGEMENT

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.99980

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
MERCHANT 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.99981

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 DR

City State Zip Code
FAIRFAX VA 22030

Purpose of Disbursement
BANK 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 / 04 / 2010

Transaction ID : **SB21B.99982**

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

B. INTEGRAM

Mailing Address 8421 HILLTOP RD

City State Zip Code
FAIRFAX VA 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING

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 / 07 / 2010

Transaction ID : **SB21B.99978**

Amount of Each Disbursement this Period

3059.66

Full Name (Last, First, Middle Initial)

C. US POSTMASTER

Mailing Address MAIN POST OFFICE

City State Zip Code
WASHINGTON DC 20001

Purpose of Disbursement
PO BOX RENEWAL

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 / 01 / 2010

Transaction ID : **SB21B.99983**

Amount of Each Disbursement this Period

520.00

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

3654.66

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

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. WASHINGTON INTELLIGENCE BUREAU

Date of Disbursement

Mailing Address 4128 PEPSI PLACE

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2010

City State Zip Code
CHANTILLY VA 20151

Transaction ID : **SB21B.99979**

Purpose of Disbursement
CAGING & ESCROW SERVICES

001
Category/ Type

Amount of Each Disbursement this Period

1193.41

Candidate Name

BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

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

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

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

City State Zip Code

Purpose of Disbursement

Category/ Type

Amount of Each Disbursement this Period

--

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

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

1193.41

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

5909.67

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 18
	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 FUNDRAISING FOR BRPAC
Mailing Address 1155 - 15TH STREET NW SUITE 410	
City State Zip Code WASHINGTON DC 20005	

Outstanding Balance Beginning This Period 41039.01	Transaction ID : SD10.4113	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 41039.01

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 4303.21	Transaction ID : SD10.90227	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4303.21

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

Outstanding Balance Beginning This Period 2559.38	Transaction ID : SD10.90228	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2559.38

1) SUBTOTALS This Period This Page (optional)..... ▶	47901.60
2) TOTALS This Period (last page this line number only)..... ▶	
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) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 18
	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 CONSOLIDATED MAILING SERVICE	Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 504 SHAW ROAD SUITE 206	
City State Zip Code STERLING VA 20166	

Outstanding Balance Beginning This Period <input type="text" value="29842.41"/>	Transaction ID : SD10.90229	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29842.41"/>

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 <input type="text" value="5069.20"/>	Transaction ID : SD10.63979	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="5069.20"/>

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

Outstanding Balance Beginning This Period <input type="text" value="6413.34"/>	Transaction ID : SD10.90231	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3059.66"/>	Outstanding Balance at Close of This Period <input type="text" value="3353.68"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="38265.29"/>
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" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 18
	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 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 1500.00	Transaction ID : SD10.72919	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1500.00

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

Outstanding Balance Beginning This Period 189.95	Transaction ID : SD10.63997	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 189.95

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

Outstanding Balance Beginning This Period 3079.84	Transaction ID : SD10.90233	
Amount Incurred This Period 0.00	Payment This Period 1193.41	Outstanding Balance at Close of This Period 1886.43

1) SUBTOTALS This Period This Page (optional)..... ▶	3576.38
2) TOTALS This Period (last page this line number only)..... ▶	
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) ▶	0.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 18
	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 WEST END PRINTING CO	Nature of Debt (Purpose): DIRECT MAIL FUNDRAISING
Mailing Address 1609 SHERWOOD AVE	
City State Zip Code RICHMOND VA 23220	

Outstanding Balance Beginning This Period <input type="text" value="200.00"/>	Transaction ID : SD10.23902	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="200.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="200.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="89943.27"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="89943.27"/>