

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
BLACK REPUBLICAN PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		5067.27
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	5067.27									
(c) Total Receipts (from Line 19)	183340.55	183340.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	188407.82	188407.82								
7. Total Disbursements (from Line 31)	178226.38	178226.38								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10181.44	10181.44								
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)	181569.43									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
BLACK REPUBLICAN PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	30680.00	30680.00
(ii) Unitemized	152660.55	152660.55
(iii) TOTAL (add Lines 11(a)(i) and (ii)	183340.55	183340.55
(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)	183340.55	183340.55
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	183340.55	183340.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	183340.55	183340.55

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	173144.38	173144.38
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	173144.38	173144.38
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.....	5082.00	5082.00
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))..	178226.38	178226.38
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	178226.38	178226.38

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	183340.55	183340.55
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	183340.55	183340.55
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	173144.38	173144.38
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	173144.38	173144.38

**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 / 68
	<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

A. Full Name (Last, First, Middle Initial)
J SCOTT ABERCROMBIE 024, JR

Mailing Address 307 GODDARD AVE

City State Zip Code
BROOKLINE MA 02445

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
MM / DD / YYYY
05 / 20 / 2009

Transaction ID: SA11AI.65329

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR EDWARD P ADAM 975

Mailing Address 1200 MIRA MAR AVE APT 204

City State Zip Code
MEDFORD OR 97504

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
MM / DD / YYYY
02 / 17 / 2009

Transaction ID: SA11AI.65342

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
FRED ALTIERE 282

Mailing Address 8000 SCOTTVIEW DR

City State Zip Code
CHARLOTTE NC 28214

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 ▼
205.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2009

Transaction ID: SA11AI.65399

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional) ▶ **625.00**

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 / 68
(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)
MRS GERTRUDE ARNOLD 487

Mailing Address 1727 W HOPPE RD

City State Zip Code
UNIONVILLE MI 48767

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
02 / 18 / 2009

Transaction ID: SA11AI.65485

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
MRS WILLIAM BARNES 631

Mailing Address 3 FOXBORO RD

City State Zip Code
SAINT LOUIS MO 63124

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 MM / DD / YYYY
04 / 20 / 2009

Transaction ID: SA11AI.65622

Amount of Each Receipt this Period
100.00

C.

Full Name (Last, First, Middle Initial)
MS ELIZABETH BRYDEN 100

Mailing Address 1 W 67TH ST APT 611

City State Zip Code
NEW YORK NY 10023

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
06 / 08 / 2009

Transaction ID: SA11AI.66183

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional) 355.00

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 / 68
(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 SELF EMPLOYED Occupation INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **01 / 30 / 2009**

Transaction ID: SA11AI.66368

Amount of Each Receipt this Period **250.00**

B.

Full Name (Last, First, Middle Initial)
MS MARGARET C CAVNEY 605

Mailing Address 546 DALEWOOD LN

City State Zip Code
HINSDALE IL 60521

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 **05 / 27 / 2009**

Transaction ID: SA11AI.66439

Amount of Each Receipt this Period **500.00**

C.

Full Name (Last, First, Middle Initial)
MR FOY N CHALK 291

Mailing Address PO BOX 2717

City State Zip Code
WEST COLUMBIA SC 29171

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

Name of Employer SELF EMPLOYED Occupation CPA

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt **06 / 15 / 2009**

Transaction ID: SA11AI.66453

Amount of Each Receipt this Period **150.00**

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 9 / 68
(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)
MRS JOANNA CHAMPLIN 731
Mailing Address 6325 HARDEN DR
City State Zip Code
OKLAHOMA CITY OK 73118
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: 03 / 18 / 2009
Transaction ID: SA11AI.66460
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
MRS ELLOINE M CLARK 752
Mailing Address 3716 MAPLEWOOD AVE
City State Zip Code
DALLAS TX 75205
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 ▼ 1500.00
Date of Receipt: 03 / 20 / 2009
Transaction ID: SA11AI.66529
Amount of Each Receipt this Period: 1500.00

C. Full Name (Last, First, Middle Initial)
MR THOMAS COURTNEY 750
Mailing Address 906 PEBBLEBROOK DR
City State Zip Code
ALLEN TX 75002
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 ▼ 201.00
Date of Receipt: 06 / 25 / 2009
Transaction ID: SA11AI.66727
Amount of Each Receipt this Period: 25.00

SUBTOTAL of Receipts This Page (optional) ► 1775.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 68
(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 CRAWFORD 950

Mailing Address 20128 CHATEAU DR

City State Zip Code
SARATOGA CA 95070

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

Name of Employer Occupation
INTEL CORP COMPUTER ARCHITECT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
MM / DD / YYYY
06 / 19 / 2009

Transaction ID: SA11AI.66758

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)
DR ANDREW CROOK 950

Mailing Address 2600 CASTELLO WAY

City State Zip Code
SANTA CLARA CA 95051

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

Name of Employer Occupation
LOCKHEED MARTIN ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
MM / DD / YYYY
05 / 19 / 2009

Transaction ID: SA11AI.66794

Amount of Each Receipt this Period
150.00

C.

Full Name (Last, First, Middle Initial)
MR RICHARD T CUNNIFF 117

Mailing Address 14 E GATE RD

City State Zip Code
HUNTINGTON NY 11743

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

Name of Employer Occupation
RUANE CANNIFF & CO INC INVESTMENT MGR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
MM / DD / YYYY
02 / 02 / 2009

Transaction ID: SA11AI.66830

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: (check only one)	PAGE 11 / 68
	<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 MARJORIE DAVIS 043		Date of Receipt	
	Mailing Address 6 HUCKLEBERRY LN		M M / D D / Y Y Y Y Y 04 / 24 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.66909
	AUGUSTA	ME	04330	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1800.00	
Name of Employer NONE		Occupation NOT EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1800.00		

B.	Full Name (Last, First, Middle Initial) MR RICHARD DYER 941		Date of Receipt	
	Mailing Address 124 SANTA CLARA AVE		M M / D D / Y Y Y Y Y 05 / 06 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.67224
	SAN FRANCISCO	CA	94127	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		50.00	
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 ▼ 210.00		

C.	Full Name (Last, First, Middle Initial) MR WILLIAM R ENGEL 501		Date of Receipt	
	Mailing Address 7059 COBURN LN		M M / D D / Y Y Y Y Y 05 / 26 / 2009	
	City	State	Zip Code	Transaction ID: SA11AI.67319
	JOHNSTON	IA	50131	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
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 ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	▶	1800.00
TOTAL This Period (last page this line number only)	▶	2150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 68
	<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 WILLIAM R ENGEL 501		Date of Receipt
	Mailing Address 7059 COBURN 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
	JOHNSTON	IA	50131
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.67320
	C		Amount of Each Receipt this Period
Name of Employer NONE		Occupation RETIRED	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	250.00
		<input type="text"/>	550.00

B.	Full Name (Last, First, Middle Initial) MR RICHARD GREGG 076		Date of Receipt
	Mailing Address 15 DYATT PL		<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
	HACKENSACK	NJ	07601
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.67913
	C		Amount of Each Receipt this Period
Name of Employer THE GREGG COMPANY, LTD		Occupation EXECUTIVE	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	3000.00
		<input type="text"/>	3000.00

C.	Full Name (Last, First, Middle Initial) MRS JANE T GRETTER 198		Date of Receipt
	Mailing Address 4830 KENNETT PIKE APT 4205		<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
	WILMINGTON	DE	19807
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.67920
	C		Amount of Each Receipt this Period
Name of Employer NONE		Occupation RETIRED	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	250.00
		<input type="text"/>	250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>	3500.00
TOTAL This Period (last page this line number only)	<input type="text"/>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 68
(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 JERRY HAYDEN 600

Mailing Address 352 DEEPWOOD RD

City State Zip Code
BARRINGTON IL 60010

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

Name of Employer Occupation
PEACOCK ENGINEERING CO CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
01 / 30 / 2009

Transaction ID: SA11AI.68157

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
MR RICHARD J HAYDINGER 080

Mailing Address 12 PARTRIDGE CT

City State Zip Code
CHERRY HILL NJ 08003

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

Name of Employer Occupation
FIRST MONTGOMERY GROUP MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt
MM / DD / YYYY
05 / 20 / 2009

Transaction ID: SA11AI.68160

Amount of Each Receipt this Period
1000.00

C.

Full Name (Last, First, Middle Initial)
MR PAUL G HEIER 936

Mailing Address 701 W HERBERT AVE APT 63

City State Zip Code
REEDLEY CA 93654

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
MM / DD / YYYY
02 / 17 / 2009

Transaction ID: SA11AI.68189

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► **2200.00**

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 / 68
	<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 LAWSON JOHNSTON 085

Mailing Address 215 CARTER RD

City PRINCETON State NJ Zip Code 08540

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

Name of Employer GUGGRENHEIM BROTHERS Occupation PAINTER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: MM / DD / YYYY
06 / 02 / 2009

Transaction ID: SA11AI.68629

Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
MRS MARIE-LUISE KALSI 770

Mailing Address 13307 CAROUSEL CT

City HOUSTON State TX Zip Code 77041

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
04 / 20 / 2009

Transaction ID: SA11AI.68712

Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
MRS MARIE-LUISE KALSI 770

Mailing Address 13307 CAROUSEL CT

City HOUSTON State TX Zip Code 77041

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
05 / 06 / 2009

Transaction ID: SA11AI.68713

Amount of Each Receipt this Period: 100.00

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 15 / 68
(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)
MRS MARIE-LUISE KALSI 770

Mailing Address 13307 CAROUSEL CT

City HOUSTON State TX Zip Code 77041

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 ▼ 550.00

Date of Receipt: 06 / 29 / 2009
Transaction ID: SA11AI.68714
Amount of Each Receipt this Period: 150.00

B. Full Name (Last, First, Middle Initial)
MR STEPHEN KELLER 333

Mailing Address 777 BAYSHORE DR

City FORT LAUDERDALE State FL Zip Code 33304

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: 06 / 03 / 2009
Transaction ID: SA11AI.68777
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
MISS LINDA KENDALL 330

Mailing Address 50 CLUB HOUSE RD

City KEY LARGO State FL Zip Code 33037

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: 06 / 19 / 2009
Transaction ID: SA11AI.68806
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 16 / 68

(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)
MRS NANCY KISSINGER 067

Mailing Address PO BOX 38

City State Zip Code
SOUTH KENT CT 06785

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

M M / D D / Y Y Y Y
0 5 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.68893

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
MR WALTER H KLEINER 980

Mailing Address 1725 89TH PL NE

City State Zip Code
CLYDE HILL WA 98004

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 ▼
255.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 0 9

Transaction ID: SA11AI.68905

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)
DR E KUCWAY 435

Mailing Address 5954 WALNUT SPRINGS RD

City State Zip Code
SYLVANIA OH 43560

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 0 4 / 2 0 0 9

Transaction ID: SA11AI.69008

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 17 / 68

(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)
MRS JANE OSLER KYLE 130

Mailing Address 215 SUMMERHAVEN DR S

City State Zip Code
EAST SYRACUSE NY 13057

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.69041

Amount of Each Receipt this Period

125.00

B.

Full Name (Last, First, Middle Initial)
MRS JANE OSLER KYLE 130

Mailing Address 215 SUMMERHAVEN DR S

City State Zip Code
EAST SYRACUSE NY 13057

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 9 / 2 0 0 9

Transaction ID: SA11AI.69042

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)
MR KARL O LEE 574

Mailing Address 1919 12TH AVE SE

City State Zip Code
ABERDEEN SD 57401

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 ▼
750.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 7 / 2 0 0 9

Transaction ID: SA11AI.69160

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional)

1025.00

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 18 / 68
	<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 DAVID L LUKE 100, III		Date of Receipt			
	Mailing Address 775 PARK AVE		M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 9			
	City	State	Zip Code	Transaction ID: SA11AI.69335		
	NEW YORK	NY	10021	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C		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 ▼		400.00		

B.	Full Name (Last, First, Middle Initial) MR MIKE MANGIONE 926		Date of Receipt			
	Mailing Address 3130 CORTE PORTOFINO		M M / D D / Y Y Y Y Y 0 4 / 2 9 / 2 0 0 9			
	City	State	Zip Code	Transaction ID: SA11AI.69433		
	NEWPORT BEACH	CA	92660	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C		1126.00	
	Name of Employer MANGIONE INC		Occupation MCDONALDS LICENSEE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		1126.00		

C.	Full Name (Last, First, Middle Initial) MR PERRIN MARCH 452, III		Date of Receipt			
	Mailing Address 7 GRANDIN PL		M M / D D / Y Y Y Y Y 0 5 / 1 9 / 2 0 0 9			
	City	State	Zip Code	Transaction ID: SA11AI.69449		
	CINCINNATI	OH	45208	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C		500.00	
	Name of Employer CINCINNATTI INC		Occupation MANUFACTURER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		500.00		

SUBTOTAL of Receipts This Page (optional)	▶	2026.00
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 19 / 68
	<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 RICHARD MARTELL 333

Mailing Address 1700 W LAS OLAS BLVD

City State Zip Code
FORT LAUDERDALE FL 33312

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

Name of Employer SELF Occupation **BUSINESSMAN**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **02 / 25 / 2009**

Transaction ID: SA11AI.69479

Amount of Each Receipt this Period **250.00**

B. Full Name (Last, First, Middle Initial)
MR KENNETH C MCCORMICK 770

Mailing Address 11622 GLENORA DR

City State Zip Code
HOUSTON TX 77065

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 **02 / 11 / 2009**

Transaction ID: SA11AI.69595

Amount of Each Receipt this Period **200.00**

C. Full Name (Last, First, Middle Initial)
MRS HELEN H MEHELICH 982

Mailing Address 2889 SLATER RD

City State Zip Code
OAK HARBOR WA 98277

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

Name of Employer RETIRED Occupation **HOUSEWIFE**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **06 / 22 / 2009**

Transaction ID: SA11AI.69706

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 20 / 68
(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)
THOMAS MIMS 770

Mailing Address 1655 BANKS ST

City HOUSTON State TX Zip Code 77006

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 28 / 2009
Transaction ID: SA11AI.69824
Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
MR JOSEPH H MOORE 853

Mailing Address PO BOX 5132

City SUN CITY WEST State AZ Zip Code 85376

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: 04 / 17 / 2009
Transaction ID: SA11AI.69944
Amount of Each Receipt this Period: 200.00

C.

Full Name (Last, First, Middle Initial)
IA MORRIS 144

Mailing Address 2867 OUTLET RD

City CLIFTON SPRINGS State NY Zip Code 14432

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

Name of Employer G W LISK CO Occupation PRESIDENT/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 18 / 2009
Transaction ID: SA11AI.69967
Amount of Each Receipt this Period: 250.00

SUBTOTAL of Receipts This Page (optional) ► **700.00**

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 21 / 68

(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)
REV EDMUND W OLIFIERS 209, JR

Mailing Address 2129 BUCKNELL TER

City State Zip Code
SILVER SPRING MD 20902

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

Name of Employer Occupation
CLERGY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00

Date of Receipt

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

Transaction ID: SA11AI.70249

Amount of Each Receipt this Period

225.00

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
NONE HOMEMAKER

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

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.70351

Amount of Each Receipt this Period

250.00

C.

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
NONE HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 550.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: SA11AI.70352

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

675.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 68
	<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) ANDREW PAPOUTSIS 172		Date of Receipt
	Mailing Address 11674 COUNTRY CLUB CT		<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
	WAYNESBORO	PA	17268
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.70368
Name of Employer APX ENCLOSURE INC		Occupation MANAGER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) MR JOHN PENSON 752		Date of Receipt
	Mailing Address 3756 ARMSTRONG AVE		<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
	DALLAS	TX	75205
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.70459
Name of Employer PENSON PROPERTIES INC		Occupation INVESTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) MRS BONNIE B PEREIDA 784		Date of Receipt
	Mailing Address 1002 KARNAK 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
	CORPUS CHRISTI	TX	78412
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.70472
Name of Employer MERRILL LYNCH		Occupation STOCK BROKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 200.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 700.00
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 23 / 68
(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 REBECCA PICK 221

Mailing Address 3185 WHEATLAND FARMS DR

City OAKTON State VA Zip Code 22124

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 05 / 26 / 2009
Transaction ID: SA11AI.70542
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
MR RUSSELL D RAWN 722

Mailing Address 12 FOXHUNT TRL

City LITTLE ROCK State AR Zip Code 72227

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 06 / 17 / 2009
Transaction ID: SA11AI.70789
Amount of Each Receipt this Period 35.00

C. Full Name (Last, First, Middle Initial)
DR WALLACE A REED 850

Mailing Address 4716 N DROMEDARY RD

City PHOENIX State AZ Zip Code 85018

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 ▼ 415.00

Date of Receipt 05 / 15 / 2009
Transaction ID: SA11AI.70812
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 785.00

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 / 68
	<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 LUNSFORD RICHARDSON 068, JR

Mailing Address 7 INDIAN SPRING RD

City NORWALK State CT Zip Code 06853

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: 06 / 09 / 2009
Transaction ID: SA11AI.70860
Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
LYNN ROBBINS 454

Mailing Address 1651 LADERA TRL

City CENTERVILLE State OH Zip Code 45459

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

Name of Employer NSI Occupation NEUROSURGEON

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 06 / 03 / 2009
Transaction ID: SA11AI.70917
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
MR JACK H ROBERTS 852

Mailing Address 2138 N NICKLAUS DR

City MESA State AZ Zip Code 85215

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: 03 / 09 / 2009
Transaction ID: SA11AI.70930
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: PAGE 25 / 68

(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 JOEL B ROTHMAN 926

Mailing Address 27 CARMEL BAY DR

City State Zip Code
CORONA DL MAR CA 92625

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

Name of Employer Occupation
ENTERTAINMENT INDUSTRY MUSIC PRODUCER

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

Date of Receipt

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

Transaction ID: SA11AI.71045

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
MS JANICE B RUBEL 331

Mailing Address 2000 S BAYSHORE DR

City State Zip Code
MIAMI FL 33133

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

Name of Employer Occupation
INNISFREE, INC IMPORT SPECIALIST

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 675.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.71064

Amount of Each Receipt this Period

675.00

C.

Full Name (Last, First, Middle Initial)
MRS ELIZABETH J SCHAFER 921

Mailing Address 1101 IST ST NIT 411

City State Zip Code
CORONADO CA 92118

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 ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.71190

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1425.00

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 / 68
	<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 DOREEN G SOLOMON 913		Date of Receipt
	Mailing Address 19843 LINNET 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
	WOODLAND HILLS	CA	91364
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.71584
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 263.00	<input type="text"/> 150.00

B.	Full Name (Last, First, Middle Initial) MARION L SPRAY 451		Date of Receipt
	Mailing Address 5539 E US HIGHWAY 22 AND 3		<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
	MORROW	OH	45152
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.71632
Name of Employer SELF		Occupation OWNER-OPERATOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 250.00	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) MR STUART W STEDMAN 770		Date of Receipt
	Mailing Address 3354 CHEVY CHASE 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
	HOUSTON	TX	77019
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.71679
Name of Employer WESLEY WEST INTERESTS INC		Occupation PRESIDENT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 250.00	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 650.00
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: (check only one)	PAGE 27 / 68
	<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 JOHN STRASENBURG 082		Date of Receipt			
	Mailing Address 2670 N ROUTE 9		M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 9			
	City	State	Zip Code	Transaction ID: SA11AI.71767		
	OCEAN VIEW	NJ	08230	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C		150.00	
	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 ▼		350.00		

B.	Full Name (Last, First, Middle Initial) MRS JOHN STRASENBURG 082		Date of Receipt			
	Mailing Address 2670 N ROUTE 9		M M / D D / Y Y Y Y Y 0 5 / 2 0 / 2 0 0 9			
	City	State	Zip Code	Transaction ID: SA11AI.71768		
	OCEAN VIEW	NJ	08230	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C		50.00	
	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 ▼		400.00		

C.	Full Name (Last, First, Middle Initial) MRS JOHN STRASENBURG 082		Date of Receipt			
	Mailing Address 2670 N ROUTE 9		M M / D D / Y Y Y Y Y 0 6 / 1 9 / 2 0 0 9			
	City	State	Zip Code	Transaction ID: SA11AI.71769		
	OCEAN VIEW	NJ	08230	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C		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 ▼		500.00		

SUBTOTAL of Receipts This Page (optional)	▶	300.00
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 28 / 68
	<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 JOHN STRASENBURGH 082

Mailing Address PO BOX 175

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 ▼ **250.00**

Date of Receipt **06 / 19 / 2009**

Transaction ID: SA11AI.71772

Amount of Each Receipt this Period **50.00**

B. Full Name (Last, First, Middle Initial)
MS MARTHA SUMMERS 801

Mailing Address 3177 S GRANT ST

City State Zip Code
ENGLEWOOD CO 80113

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **259.00**

Date of Receipt **06 / 19 / 2009**

Transaction ID: SA11AI.71836

Amount of Each Receipt this Period **100.00**

C. Full Name (Last, First, Middle Initial)
MR LINCOLN THOMPSON 064, JR

Mailing Address 142 N COVE RD

City State Zip Code
OLD SAYBROOK CT 06475

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

Name of Employer VIRGINIA INDUSTRIES Occupation **CHAIRMAN**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 27 / 2009**

Transaction ID: SA11AI.72019

Amount of Each Receipt this Period **300.00**

SUBTOTAL of Receipts This Page (optional) ► **450.00**

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 / 68
	(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) MR ROBERT S TROTH 358	Date of Receipt MM / DD / YYYY 01 / 30 / 2009
	Mailing Address 18 SAINT CHARLES SQ	Transaction ID: SA11AI.72135
	City State Zip Code HUNTSVILLE AL 35801	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

B.	Full Name (Last, First, Middle Initial) MR ROBERT S TROTH 358	Date of Receipt MM / DD / YYYY 04 / 29 / 2009
	Mailing Address 18 SAINT CHARLES SQ	Transaction ID: SA11AI.72136
	City State Zip Code HUNTSVILLE AL 35801	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 ▼ 500.00

C.	Full Name (Last, First, Middle Initial) MR RAY-KENT TROUTMAN 761	Date of Receipt MM / DD / YYYY 05 / 27 / 2009
	Mailing Address 6337 KLAMATH RD	Transaction ID: SA11AI.72140
	City State Zip Code FORT WORTH TX 76116	Amount of Each Receipt this Period 100.00
	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 ▼ 213.00

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: PAGE 30 / 68
(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 FRANK H WALK 701
Mailing Address 150 BROADWAY ST APT 1112
City NEW ORLEANS State LA Zip Code 70118
FEC ID number of contributing federal political committee. **C**
Name of Employer WALK, HAYDEL & ASSOC Occupation PARTNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 02 / 23 / 2009
Transaction ID: SA11AI.72393
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
MR ASHLEY F WARD 452
Mailing Address 2 ALBION LN
City CINCINNATI State OH Zip Code 45246
FEC ID number of contributing federal political committee. **C**
Name of Employer ASHLEY F WARD INC. Occupation PRESIDENT
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 06 / 08 / 2009
Transaction ID: SA11AI.72462
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
MR MICHAEL L WARNER 080
Mailing Address 7 BRIDLE PATH
City SOUTHAMPTON State NJ Zip Code 08088
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation MANUFACTURING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 06 / 03 / 2009
Transaction ID: SA11AI.72470
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00
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 / 68
(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 LEROY WEBER 945, JR
Mailing Address PO BOX 355

City State Zip Code
RIO VISTA CA 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: MM / DD / YYYY
03 / 16 / 2009
Transaction ID: SA11AI.72508
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
MR LEROY WEBER 945, JR
Mailing Address PO BOX 355

City State Zip Code
RIO VISTA CA 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 ▼ 500.00

Date of Receipt: MM / DD / YYYY
04 / 20 / 2009
Transaction ID: SA11AI.72509
Amount of Each Receipt this Period: 200.00

C. Full Name (Last, First, Middle Initial)
MR LEROY WEBER 945, JR
Mailing Address PO BOX 355

City State Zip Code
RIO VISTA CA 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 ▼ 700.00

Date of Receipt: MM / DD / YYYY
05 / 06 / 2009
Transaction ID: SA11AI.72510
Amount of Each Receipt this Period: 200.00

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 32 / 68
(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 LEROY WEBER 945, JR
Mailing Address PO BOX 355

City State Zip Code
RIO VISTA CA 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 ▼ 900.00

Date of Receipt: MM / DD / YYYY
05 / 26 / 2009
Transaction ID: SA11AI.72511
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
MRS L J WHITMEYER 759, JR
Mailing Address HC 1 BOX 110

City State Zip Code
COLMESNEIL TX 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 ▼ 250.00

Date of Receipt: MM / DD / YYYY
02 / 20 / 2009
Transaction ID: SA11AI.72609
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
MR RICHARD L WICKENS 871
Mailing Address 9043 GUADALUPE TRL NW

City State Zip Code
ALBUQUERQUE NM 87114

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

Name of Employer LUMBER INC Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: MM / DD / YYYY
04 / 20 / 2009
Transaction ID: SA11AI.72622
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: (check only one)	PAGE 33 / 68
	<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 RICHARD L WICKENS 871		Date of Receipt
	Mailing Address 9043 GUADALUPE TRL NW		<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
	ALBUQUERQUE	NM	87114
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.72623
Name of Employer LUMBER INC	Occupation EXECUTIVE	Amount of Each Receipt this Period	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text"/>	100.00
	<input type="text"/>	<input type="text"/>	400.00

B.	Full Name (Last, First, Middle Initial) MRS BARBARA H WILSON 941		Date of Receipt
	Mailing Address 2540 GREEN 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
	SAN FRANCISCO	CA	94123
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.72711
Name of Employer NONE	Occupation RETIRED	Amount of Each Receipt this Period	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text"/>	250.00
	<input type="text"/>	<input type="text"/>	250.00

C.	Full Name (Last, First, Middle Initial) MRS BARBARA H WILSON 941		Date of Receipt
	Mailing Address 2540 GREEN 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
	SAN FRANCISCO	CA	94123
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: SA11AI.72712
Name of Employer NONE	Occupation RETIRED	Amount of Each Receipt this Period	<input type="text"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text"/>	100.00
	<input type="text"/>	<input type="text"/>	350.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>
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 34 / 68
(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 MIKE WOLF 993

Mailing Address PO BOX 803

City State Zip Code
PROSSER WA 99350

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

Name of Employer Occupation
WASHINGTON STATE TRAFFIC SPECIALIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
MM / DD / YYYY
02 / 10 / 2009

Transaction ID: SA11AI.72753

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
MR DONALD R WOODRUFF 334

Mailing Address 100 LAKE SHORE DRIVE SUITE 1551

City State Zip Code
N PALM BEACH FL 33408

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
MM / DD / YYYY
06 / 02 / 2009

Transaction ID: SA11AI.72781

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MRS IRMA WYLY 919

Mailing Address 5750 AMAYA DR UNIT 15

City State Zip Code
LA MESA CA 91942

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 ▼ **339.00**

Date of Receipt
MM / DD / YYYY
04 / 20 / 2009

Transaction ID: SA11AI.72820

Amount of Each Receipt this Period
339.00

SUBTOTAL of Receipts This Page (optional) ► **889.00**

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 35 / 68
(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)
MRS SHARON J YODER 175

Mailing Address 1151 CLAY RD

City State Zip Code
LITITZ PA 17543

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
MM / DD / YYYY
04 / 17 / 2009

Transaction ID: SA11AI.72840

Amount of Each Receipt this Period
225.00

B.

Full Name (Last, First, Middle Initial)
MR GEORGE W YOUNG 012

Mailing Address 235 WALKER ST APT 252

City State Zip Code
LENOX MA 01240

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
MM / DD / YYYY
01 / 12 / 2009

Transaction ID: SA11AI.72850

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
MISS S ZIRNGIBL 447

Mailing Address 1690 AMARILLO ST NW

City State Zip Code
NORTH CANTON OH 44720

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2009

Transaction ID: SA11AI.72898

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	30680.00

**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) INC BASE CONNECT	Transaction ID: SB21B.65257 Date of Disbursement 03 / 19 / 2009
	Mailing Address 1155 15TH STREET NW	Amount of Each Disbursement this Period 1863.47
	City WASHINGTON State DC Zip Code 20005	
	Purpose of Disbursement DIRECT MAIL - CREATIVE Candidate Name BLACK REPUBLICAN PAC	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) INC BASE CONNECT	Transaction ID: SB21B.65258 Date of Disbursement 06 / 04 / 2009
	Mailing Address 1155 15TH STREET NW	Amount of Each Disbursement this Period 6121.28
	City WASHINGTON State DC Zip Code 20005	
	Purpose of Disbursement DIRECT MAIL - CREATIVE Candidate Name BLACK REPUBLICAN PAC	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) BASE CONNECT, INC.	Transaction ID: SB21B.72921 Date of Disbursement 02 / 19 / 2009
	Mailing Address 1155 - 15TH STREET NW SUITE 410	Amount of Each Disbursement this Period 3021.57
	City WASHINGTON State DC Zip Code 20005	
	Purpose of Disbursement DIRECT MAIL - CREATIVE Candidate Name BLACK REPUBLICAN PAC	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	11006.32
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) BASE CONNECT, INC.	Transaction ID: SB21B.72922 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>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	2		2	0	0	9												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - CREATIVE	<table border="1"><tr><td>2268.37</td></tr></table>	2268.37																		
2268.37																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) BASE CONNECT, INC.	Transaction ID: SB21B.72923 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>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - CREATIVE	<table border="1"><tr><td>1600.54</td></tr></table>	1600.54																		
1600.54																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	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) BASE CONNECT, INC.	Transaction ID: SB21B.72924 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>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	2		2	0	0	9												
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - CREATIVE	<table border="1"><tr><td>2838.88</td></tr></table>	2838.88																		
2838.88																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>003</td></tr></table> Category/Type	003																		
003																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>6707.79</td></tr></table>	6707.79
6707.79		
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)

PAGE 38 / 68

<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) CENTURY DATA MAILING SERVICES</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.65228</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 6000.00</p> <p>003 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.65229</p> <p>Date of Disbursement 02 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 7974.69</p> <p>003 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES</p> <p>Mailing Address 1155 - 15TH STREET NW SUITE 410</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement DIRECT MAIL FUNDRAISING</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.65241</p> <p>Date of Disbursement 02 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 15000.00</p> <p>003 Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>28974.69</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER: (check only one)

PAGE 39 / 68

<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.65242 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="4000.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.65248 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="850.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.65266 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING	<input type="text" value="3632.45"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8482.45"/>
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

Transaction ID: SB21B.65267
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
BLACK REPUBLICAN PAC

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.65264
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
BLACK REPUBLICAN PAC

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.65265
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
BLACK REPUBLICAN PAC

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

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICES	Transaction ID: SB21B.65268 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="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="2253.88"/>
	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.65269 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="5000.00"/>
	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.65270 Date of Disbursement
	Mailing Address 1155 - 15TH STREET NW SUITE 410	<input type="text" value="05"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL FUNDRAISING Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="3000.00"/>
	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) ▼	

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)
CENTURY DATA MAILING SERVICES

Transaction ID: SB21B.65271
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW
SUITE 410

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	9

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
DIRECT MAIL FUNDRAISING

003
Category/ Type

2000.00

Candidate Name
BLACK REPUBLICAN PAC

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.65272
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW
SUITE 410

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	0	9

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
DIRECT MAIL FUNDRAISING

003
Category/ Type

8990.98

Candidate Name
BLACK REPUBLICAN PAC

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.65273
Date of Disbursement

Mailing Address 1155 - 15TH STREET NW
SUITE 410

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	0		2	0	0	9

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement
DIRECT MAIL FUNDRAISING

003
Category/ Type

5997.77

Candidate Name
BLACK REPUBLICAN PAC

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

SUBTOTAL of Disbursements This Page (optional)

16988.75

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
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
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.65274
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	9		2	0	0	9

Amount of Each Disbursement this Period

12077.95

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
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.65275
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	0	9

Amount of Each Disbursement this Period

4578.15

C. Full Name (Last, First, Middle Initial)
CENTURY DATA SYSTEMS

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DIRECT MAIL FUNDRAISING

Candidate Name
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.65243
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	0	9

Amount of Each Disbursement this Period

1468.16

SUBTOTAL of Disbursements This Page (optional) ►

18124.26

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.65235 Date of Disbursement
	Mailing Address 504 SHAW ROAD SUITE 206	<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - PRINTING	<input type="text" value="3731.20"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.65279 Date of Disbursement
	Mailing Address 504 SHAW ROAD SUITE 206	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - PRINTING	<input type="text" value="650.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.65277 Date of Disbursement
	Mailing Address 504 SHAW ROAD SUITE 206	<input type="text" value="04"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - PRINTING	<input type="text" value="1236.50"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5617.70"/>
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) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.65278 Date of Disbursement
	Mailing Address 504 SHAW ROAD SUITE 206	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - PRINTING	<input type="text" value="500.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.65280 Date of Disbursement
	Mailing Address 504 SHAW ROAD SUITE 206	<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - PRINTING	<input type="text" value="1500.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.65281 Date of Disbursement
	Mailing Address 504 SHAW ROAD SUITE 206	<input type="text" value="05"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period
	Purpose of Disbursement DIRECT MAIL - PRINTING	<input type="text" value="1000.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
BLACK REPUBLICAN PAC

A.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.65282 Date of Disbursement																			
	Mailing Address 504 SHAW ROAD SUITE 206	<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>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		0	4		2	0	0	9												
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - PRINTING	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name BLACK REPUBLICAN PAC	003 Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.65283 Date of Disbursement																			
	Mailing Address 504 SHAW ROAD SUITE 206	<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>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	0		2	0	0	9												
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - PRINTING	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name BLACK REPUBLICAN PAC	003 Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICE	Transaction ID: SB21B.65284 Date of Disbursement																			
	Mailing Address 504 SHAW ROAD SUITE 206	<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>9</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	9												
	City STERLING State VA Zip Code 20166	Amount of Each Disbursement this Period																			
	Purpose of Disbursement DIRECT MAIL - PRINTING	<table border="1"><tr><td>6109.90</td></tr></table>	6109.90																		
6109.90																					
	Candidate Name BLACK REPUBLICAN PAC	003 Category/Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>9609.90</td></tr></table>	9609.90
9609.90		
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)
MR EDWARD J COUSAR

Transaction ID: SB21B.65221
Date of Disbursement

Mailing Address PO BOX 96613

/ /

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

Purpose of Disbursement
REIMBURSED TRAVEL EXPENSES

Category/
Type

Candidate Name
BLACK REPUBLICAN PAC

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
MR EDWARD J COUSAR

Transaction ID: SB21B.65234
Date of Disbursement

Mailing Address PO BOX 96613

/ /

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

Purpose of Disbursement
REIMBURSEMENT FOR TRAVEL EXPENSES

Category/
Type

Candidate Name
BLACK REPUBLICAN PAC

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
MR EDWARD J COUSAR

Transaction ID: SB21B.65249
Date of Disbursement

Mailing Address PO BOX 96613

/ /

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

Purpose of Disbursement
REIMBURSEMENT FOR TRAVEL EXPENSES

Category/
Type

Candidate Name
BLACK REPUBLICAN PAC

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 48 / 68

<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.65286 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 0 9	
	Mailing Address 11325 RANDOM HILLS DR		Amount of Each Disbursement this Period 146.82
	City FAIRFAX State VA Zip Code 22030 Purpose of Disbursement MERCHANT SERVICE CHARGE Candidate Name BLACK REPUBLICAN PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	001 Category/ Type	
B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65287 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9	
	Mailing Address 11325 RANDOM HILLS DR		Amount of Each Disbursement this Period 54.69
	City FAIRFAX State VA Zip Code 22030 Purpose of Disbursement SERVICE CHARGE Candidate Name BLACK REPUBLICAN PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	001 Category/ Type	
C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65288 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 9	
	Mailing Address 11325 RANDOM HILLS DR		Amount of Each Disbursement this Period 13.82
	City FAIRFAX State VA Zip Code 22030 Purpose of Disbursement AMEX DISCOUNT FEE Candidate Name BLACK REPUBLICAN PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	001 Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	215.33
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input 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.65290 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>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	3		2	0	0	9												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MERCHANT SERVICE CHARGE	<table border="1"><tr><td>60.00</td></tr></table>	60.00																		
60.00																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65291 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>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	3		2	0	0	9												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MERCHANT SERVICE CHARGE	<table border="1"><tr><td>197.88</td></tr></table>	197.88																		
197.88																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65292 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>2</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	7		2	0	0	9												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement SERVICE CHARGE	<table border="1"><tr><td>113.40</td></tr></table>	113.40																		
113.40																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>371.28</td></tr></table>	371.28
371.28		
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) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65289
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement MM / DD / YYYY 02 / 28 / 2009
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 46.86
	Purpose of Disbursement AMEX DISCOUNT FEE	001 Category/Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65299
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement MM / DD / YYYY 03 / 03 / 2009
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 308.34
	Purpose of Disbursement MERCHANT SERVICE CHARGE	001 Category/Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65300
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement MM / DD / YYYY 03 / 09 / 2009
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 70.00
	Purpose of Disbursement MERCHANT SERVICE CHARGE	001 Category/Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	425.20
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

A.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65301 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>3</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	9		2	0	0	9												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement MERCHANT SERVICE CHARGE	<table border="1"><tr><td>70.00</td></tr></table>	70.00																		
70.00																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65298 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>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	9												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement AMEX DISCOUNT FEE	<table border="1"><tr><td>11.45</td></tr></table>	11.45																		
11.45																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65302 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>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	9												
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period																			
	Purpose of Disbursement SERVICE CHARGE	<table border="1"><tr><td>53.22</td></tr></table>	53.22																		
53.22																					
	Candidate Name BLACK REPUBLICAN PAC	<table border="1"><tr><td>001</td></tr></table> Category/ Type	001																		
001																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>134.67</td></tr></table>	134.67
134.67		
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) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65293
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement 04 / 02 / 2009
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 60.00
	Purpose of Disbursement MERCHANT SERVICE CHARGE	001 Category/ Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65294
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement 04 / 02 / 2009
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 132.71
	Purpose of Disbursement MERCHANT SERVICE CHARGE	001 Category/ Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65295
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement 04 / 22 / 2009
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 4.95
	Purpose of Disbursement AMEX COLLECTION FEE	001 Category/ Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	197.66
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

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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.65296
Date of Disbursement

Mailing Address 11325 RANDOM HILLS DR

/ /

City FAIRFAX State VA Zip Code 22030

Amount of Each Disbursement this Period

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:

B.

Full Name (Last, First, Middle Initial)
FIRST VIRGINIA COMMUNITY BANK

Transaction ID: SB21B.65297
Date of Disbursement

Mailing Address 11325 RANDOM HILLS DR

/ /

City FAIRFAX State VA Zip Code 22030

Amount of Each Disbursement this Period

Purpose of Disbursement
NET SERVICE CHARGE

Category/
Type

Candidate Name
BLACK REPUBLICAN PAC

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

C.

Full Name (Last, First, Middle Initial)
FIRST VIRGINIA COMMUNITY BANK

Transaction ID: SB21B.65303
Date of Disbursement

Mailing Address 11325 RANDOM HILLS DR

/ /

City FAIRFAX State VA Zip Code 22030

Amount of Each Disbursement this Period

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:

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)

PAGE 54 / 68

<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.65304 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement MERCHANT SERVICE CHARGE	<input type="text" value="49.14"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65305 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement MERCHANT SERVICE CHARGE	<input type="text" value="70.00"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65306 Date of Disbursement
	Mailing Address 11325 RANDOM HILLS DR	<input type="text" value="05"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period
	Purpose of Disbursement AMEX COLLECTION	<input type="text" value="4.95"/>
	Candidate Name BLACK REPUBLICAN PAC	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="124.09"/>
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)

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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) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65307
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement 05 / 29 / 2009
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 75.64
	Purpose of Disbursement NET SERVICE CHARGE	001 Category/ Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65308
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement 05 / 31 / 2009
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 58.08
	Purpose of Disbursement AMEX DISCOUNT FEE	001 Category/ Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK	Transaction ID: SB21B.65309
	Mailing Address 11325 RANDOM HILLS DR	Date of Disbursement 06 / 02 / 2009
	City FAIRFAX State VA Zip Code 22030	Amount of Each Disbursement this Period 51.68
	Purpose of Disbursement MERCHANT SERVICE CHARGE	001 Category/ Type
	Candidate Name BLACK REPUBLICAN PAC	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	185.40
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
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 MERCHANT SERVICE CHARGE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.65310 Date of Disbursement 06 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 70.00</p> <p>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 AMEX COLLECTION FEE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.65311 Date of Disbursement 06 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 4.95</p> <p>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 NET SERVICE CHARGE</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.65312 Date of Disbursement 06 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 160.22</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	235.17
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

Mailing Address 11325 RANDOM HILLS DR

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement
AMEX DISCOUNT FEE

Candidate Name
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.65313

Date of Disbursement

06 / 30 / 2009

Amount of Each Disbursement this Period

67.68

B.

Full Name (Last, First, Middle Initial)
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING

Candidate Name
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.65224

Date of Disbursement

01 / 22 / 2009

Amount of Each Disbursement this Period

7618.16

C.

Full Name (Last, First, Middle Initial)
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
DIRECT MAIL - PRINTING

Candidate Name
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.65314

Date of Disbursement

04 / 30 / 2009

Amount of Each Disbursement this Period

2374.34

SUBTOTAL of Disbursements This Page (optional) ▶

10060.18

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) INTEGRAM	Transaction ID: SB21B.65315 Date of Disbursement 05 / 07 / 2009
	Mailing Address 8421 HILLTOP RD	Amount of Each Disbursement this Period 2000.00
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement DIRECT MAIL - PRINTING Candidate Name BLACK REPUBLICAN PAC	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) INTEGRAM	Transaction ID: SB21B.65316 Date of Disbursement 06 / 04 / 2009
	Mailing Address 8421 HILLTOP RD	Amount of Each Disbursement this Period 3000.00
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement DIRECT MAIL - PRINTING Candidate Name BLACK REPUBLICAN PAC	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) INTEGRAM	Transaction ID: SB21B.65317 Date of Disbursement 06 / 10 / 2009
	Mailing Address 8421 HILLTOP RD	Amount of Each Disbursement this Period 2718.18
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement DIRECT MAIL - PRINTING Candidate Name BLACK REPUBLICAN PAC	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7718.18
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

<p>A. 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 BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.65318</p> <p>Date of Disbursement MM / DD / YYYY 06 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 690.00</p> <p>Category/Type 003</p>
<p>B. Full Name (Last, First, Middle Initial) PATTON-KIEHL GROUP</p> <p>Mailing Address PO BOX 590</p> <p>City THORNBURG State VA Zip Code 22565</p> <p>Purpose of Disbursement DIRECT MAIL - MAILSHOP</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.65237</p> <p>Date of Disbursement MM / DD / YYYY 02 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 3066.29</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) PATTON-KIEHL GROUP</p> <p>Mailing Address PO BOX 590</p> <p>City THORNBURG State VA Zip Code 22565</p> <p>Purpose of Disbursement DIRECT MAIL - MAILSHOP</p> <p>Candidate Name BLACK REPUBLICAN PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.65244</p> <p>Date of Disbursement MM / DD / YYYY 02 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 2151.71</p> <p>Category/Type 001</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5908.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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.	Full Name (Last, First, Middle Initial) STANDARD NEWSWIRE Mailing Address ONE PENN PLAZA SUITE 6202 City NEW YORK State NY Zip Code 10119 Purpose of Disbursement PRESS RELEASE SERVICES Candidate Name BLACK REPUBLICAN PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.65319 Date of Disbursement 03 / 26 / 2009 Amount of Each Disbursement this Period 925.00 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) TSC CORP Mailing Address 1800 CAMDEN RD SUITE 107-115 City CHARLOTTE State NC Zip Code 28203 Purpose of Disbursement PRINTING STATIONARY Candidate Name BLACK REPUBLICAN PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.65251 Date of Disbursement 03 / 12 / 2009 Amount of Each Disbursement this Period 1820.00 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) US POSTMASTER Mailing Address MAIN POST OFFICE City WASHINGTON State DC Zip Code 20001 Purpose of Disbursement PO BOX RENEWAL Candidate Name BLACK REPUBLICAN PAC Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB21B.65321 Date of Disbursement 03 / 27 / 2009 Amount of Each Disbursement this Period 495.00 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3240.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
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
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.65222

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

4410.46

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
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.65238

Date of Disbursement

02 / 12 / 2009

Amount of Each Disbursement this Period

1920.16

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
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.65324

Date of Disbursement

03 / 19 / 2009

Amount of Each Disbursement this Period

1320.31

SUBTOTAL of Disbursements This Page (optional) ▶

7650.93

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 62 / 68

<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
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.65322

Date of Disbursement

/ /

Amount of Each Disbursement this Period

977.18

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
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB21B.65325

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1324.27

SUBTOTAL of Disbursements This Page (optional)

2301.45

TOTAL This Period (last page this line number only)

173009.38

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

A. Full Name (Last, First, Middle Initial)
BLACKWELL FOR CHAIRMAN

Mailing Address 693 WINDINGS LN

City CINCINNATI State OH Zip Code 45220

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB29.65230
Date of Disbursement

/ /

Amount of Each Disbursement this Period

867.00

Category/
Type

B. Full Name (Last, First, Middle Initial)
BLACKWELL FOR CHAIRMAN

Mailing Address 693 WINDINGS LN

City CINCINNATI State OH Zip Code 45220

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
BLACK REPUBLICAN PAC

Office Sought: House
 Senate
 President

State: District:

Disbursement For: Primary General
 Other (specify) ▼

Transaction ID: SB29.65233
Date of Disbursement

/ /

Amount of Each Disbursement this Period

4215.00

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

5082.00

TOTAL This Period (last page this line number only)

5082.00

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 - PRINTING
Mailing Address 53 MCGARRY BLVD	
City State ZIP Code KEARNYSVILLE WV 25430	

Outstanding Balance Beginning This Period 0.00	Transaction ID: SD10.72916	
Amount Incurred This Period 11703.75	Payment This Period 0.00	Outstanding Balance at Close of This Period 11703.75

B. 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 54244.84	Transaction ID: SD10.4113	
Amount Incurred This Period 29170.59	Payment This Period 17714.11	Outstanding Balance at Close of This Period 65701.32

C. 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 37457.16	Transaction ID: SD10.4119	
Amount Incurred This Period 83866.08	Payment This Period 93892.38	Outstanding Balance at Close of This Period 27430.86

1) SUBTOTALS This Period This Page (optional).....	▶	104835.93
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 65 / 68
	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 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 9639.72	Transaction ID: SD10.4114	
Amount Incurred This Period 4663.36	Payment This Period 1468.16	Outstanding Balance at Close of This Period 12834.92

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

Outstanding Balance Beginning This Period 3731.20	Transaction ID: SD10.63996	
Amount Incurred This Period 19636.29	Payment This Period 18227.60	Outstanding Balance at Close of This Period 5139.89

C. 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 3982.90	Transaction ID: SD10.63979	
Amount Incurred This Period 479.46	Payment This Period 0.00	Outstanding Balance at Close of This Period 4462.36

1) SUBTOTALS This Period This Page (optional).....	22437.17
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 FULFILLMENT HOUSE INC.			Nature of Debt (Purpose): DIRECT MAIL - PRINTING
Mailing Address 13860 REDSKIN DRIVE			
City HERNDON	State VA	ZIP Code 20171	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.72917	
Amount Incurred This Period <input type="text" value="1777.38"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1777.38"/>	

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

Outstanding Balance Beginning This Period <input type="text" value="7618.16"/>		Transaction ID: SD10.16231	
Amount Incurred This Period <input type="text" value="19832.35"/>	Payment This Period <input type="text" value="17710.68"/>	Outstanding Balance at Close of This Period <input type="text" value="9739.83"/>	

C. 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 WASHINGTON	State DC	ZIP Code 20005	

Outstanding Balance Beginning This Period <input type="text" value="23938.45"/>		Transaction ID: SD10.4117	
Amount Incurred This Period <input type="text" value="8795.78"/>	Payment This Period <input type="text" value="690.00"/>	Outstanding Balance at Close of This Period <input type="text" value="32044.23"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="43561.44"/>
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 MACKENZIE & COMPANY			Nature of Debt (Purpose): CONSULTING - COMPLIANCE
Mailing Address 3464 S UTAH ST			
City ARLINGTON	State VA	ZIP Code 22206	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.72919	
Amount Incurred This Period <input type="text" value="6000.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="6000.00"/>	

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 THORNBURG	State VA	ZIP Code 22565	

Outstanding Balance Beginning This Period <input type="text" value="5218.00"/>		Transaction ID: SD10.63997	
Amount Incurred This Period <input type="text" value="2050.81"/>	Payment This Period <input type="text" value="5218.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2050.81"/>	

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 CHANTILLY	State VA	ZIP Code 20151	

Outstanding Balance Beginning This Period <input type="text" value="4410.46"/>		Transaction ID: SD10.63998	
Amount Incurred This Period <input type="text" value="8026.00"/>	Payment This Period <input type="text" value="9952.38"/>	Outstanding Balance at Close of This Period <input type="text" value="2484.08"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="10534.89"/>
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)	PAGE 68 / 68
	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 RICHMOND	State VA	ZIP Code 23220	

Outstanding Balance Beginning This Period		Transaction ID: SD10.23902	
200.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	200.00	

1) SUBTOTALS This Period This Page (optional).....	200.00
2) TOTALS This Period (last page this line number only).....	181569.43
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)	181569.43