

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Battle Born PAC

ADDRESS (number and street) P.O. Box 370386

Check if different than previously reported. (ACC)

Las Vegas NV 89137

2. **FEC IDENTIFICATION NUMBER** C00364596

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)

Election on _____ in the State of _____

(d) 30-Day **Post -Election** Report for the:

General (30G) Runoff (30R) Special (30S)

Election on _____ in the State of _____

5. Covering Period 03 01 2008 through 03 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Cynthia Hampton

Signature of Treasurer Electronically Filed by Cynthia Hampton Date 04 11 2008

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

Office Use Only																		FEC FORM 3X (Rev. 12/2004)
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Battle Born PAC

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		109914.24
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	41885.03									
(c) Total Receipts (from Line 19)	57321.15	79742.15								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	99206.18	189656.39								
7. Total Disbursements (from Line 31)	53069.85	143520.06								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	46136.33	46136.33								
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)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Battle Born PAC

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	8250.00	9000.00
(i) Itemized (use Schedule A)	3738.50	13909.50
(ii) Unitemized	11988.50	22909.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	41500.00	53000.00
(c) Other Political Committees (such as PACs)	53488.50	75909.50
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	3832.65	3832.65
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))	57321.15	79742.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	57321.15	79742.15

DETAILED SUMMARY PAGE

of Disbursements

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.....	28069.85	68520.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	28069.85	68520.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	75000.00
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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	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))..	53069.85	143520.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53069.85	143520.06

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	53488.50	75909.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	53488.50	75909.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28069.85	68520.06
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28069.85	68520.06

**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 / 25
	<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)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) MR. AARON K. COHEN	Date of Receipt MM / DD / YYYY 03 / 17 / 2008
	Mailing Address 1007 W. BRADDOCK ROAD	Transaction ID: SA11.885
	City State Zip Code ALEXANDRIA VA 22302	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation KIMBELL & ASSOCIATES GOVERNMENT AFFAIRS	
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) MS. JENNIFER M. CONNELLY	Date of Receipt MM / DD / YYYY 03 / 17 / 2008
	Mailing Address 308 DAWNWOOD DRIVE	Transaction ID: SA11.886
	City State Zip Code EDGEWATER MD 21037	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation CEPHALON DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MR. J. BRAD EDWARDS	Date of Receipt MM / DD / YYYY 03 / 17 / 2008
	Mailing Address 2422 TAYLOR AVE	Transaction ID: SA11.887
	City State Zip Code ALEXANDRIA VA 22302	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation JENKINS HILL PRINCIPAL	
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)	▶	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 7 / 25
(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)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial)
MR. JOHN A. GALLOWAY

Mailing Address 11 PINE COBBLE

City State Zip Code
PLYMOUTH MA 02360

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 14 / 2008

Transaction ID: SA11.869

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MS. GINA M. GRANDINETTI

Mailing Address 1390 V. STREET N. W.
APT. 401

City State Zip Code
WASHINGTON DC 20009

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

Name of Employer Occupation
ENTERTAINMENT SOFTWARE AS- SOCIATION DIRECTOR, GOVERNMENT AFFAIRS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2008

Transaction ID: SA11.882

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. DAVID M. LARSON

Mailing Address 5979 N. 9TH STREET

City State Zip Code
ARLINGTON VA 22205

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

Name of Employer Occupation
AMERICAN CAPITOL GROUP PARTNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2008

Transaction ID: SA11.883

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 25
	<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)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) MR. PETER A. NUSSBAUM	Date of Receipt MM / DD / YYYY 03 / 17 / 2008
	Mailing Address 29 DOGWOOD LANE	Transaction ID: SA11.881
	City State Zip Code WESTORT CT 06880	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SAC CAPITAL ADVISORS ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) MR. MICHAEL PIEPER	Date of Receipt MM / DD / YYYY 03 / 31 / 2008
	Mailing Address 39644 LOVETTSVILLE RD	Transaction ID: SA11.964
	City State Zip Code LOVETTSVILLE VA 20180	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation R&R PARTNERS GOVERNMENT RELATIONS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MR. HERBERT W. ROBINSON	Date of Receipt MM / DD / YYYY 03 / 17 / 2008
	Mailing Address P.O. BOX 17107	Transaction ID: SA11.934
	City State Zip Code FOUNTAIN HILLS AZ 85269	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED 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)	▶	5750.00
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 / 25
	(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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial) MR. WILLIAM S. TAYLOR		Date of Receipt MM / DD / YYYY 03 / 14 / 2008
Mailing Address 10705 HOWERTON AVE		Transaction ID: SA11.868
City FAIRFAX	State VA	Zip Code 22030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer TAYLOR & REA PLC	Occupation ATTORNEY	CONTRIBUTION
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. RICHARD C. WHITE		Date of Receipt MM / DD / YYYY 03 / 17 / 2008
Mailing Address 5035 MACOMB STREET N. W.		Transaction ID: SA11.884
City WASHINGTON	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer ALPINE GROUP	Occupation CONSULTANT	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	8250.00

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

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

FOR LINE NUMBER: PAGE 10 / 25

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial)
PEOPLE FOR PETE DOMENICI

Mailing Address P.O. BOX16746

City State Zip Code
ALBUQUERQUE NM 87191

FEC ID number of contributing federal political committee. **C** C00202648

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2008

Transaction ID: SA11.859

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLIT

Mailing Address 1111 NORTH FAIRFAX STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2008

Transaction ID: SA11.962

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
BANK OF AMERICA CORPORATION PAC

Mailing Address 600 PEACHTREE ST STE 1500
P.O. BOX 40789

City State Zip Code
ATLANTA GA 30308

FEC ID number of contributing federal political committee. **C** C00043489

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 11 / 2008

Transaction ID: SA11.846

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ►

15000.00

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 / 25
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) BARRICK GOLD OF NORTH AMERICA INC. EMPLOYEES' PAC	Date of Receipt MM / DD / YYYY 03 / 17 / 2008
	Mailing Address 136 EAST SOUTH TEMPLE STREET SUITE 1300	Transaction ID: SA11.890
	City State Zip Code SALT LAKE CITY UT 84111	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00320580	CONTRIBUTION
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

B.	Full Name (Last, First, Middle Initial) CLEAR CHANNEL COMMUNICATIONS PAC	Date of Receipt MM / DD / YYYY 03 / 31 / 2008
	Mailing Address 200 E BASSE ROAD	Transaction ID: SA11.961
	City State Zip Code SAN ANTONIO TX 78209	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C C00279216	CONTRIBUTION
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

C.	Full Name (Last, First, Middle Initial) GOLDMAN SACHS GROUP, INC. PAC	Date of Receipt MM / DD / YYYY 03 / 11 / 2008
	Mailing Address 101 CONSTITUTION AVENUE N. W.	Transaction ID: SA11.848
	City State Zip Code WASHINGTON DC 20001	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00350744	CONTRIBUTION
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 25
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial) QWEST PAC		Date of Receipt MM / DD / YYYY 03 / 17 / 2008
Mailing Address 607 14TH STREET N. W. SUITE 950		Transaction ID: SA11.889
City WASHINGTON	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00237156		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

B.

Full Name (Last, First, Middle Initial) SECURITIES INDUSTRY & FINANCIAL MARKETS ASSOC. FUND A		Date of Receipt MM / DD / YYYY 03 / 11 / 2008
Mailing Address 1101 NEW YORK AVENUE 8TH FLOOR		Transaction ID: SA11.847
City WASHINGTON	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00067504		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.

Full Name (Last, First, Middle Initial) VERIZON COMMUNICATION INC GOOD GOV'T CLUB		Date of Receipt MM / DD / YYYY 03 / 17 / 2008
Mailing Address 1300 I. STREET N. W. 4TH FLOOR		Transaction ID: SA11.888
City WASHINGTON	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00186288		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	▶	9500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 25
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial) WACHOVIA CORPORATION EMPLOYEES GOOD GOVERNMENT FEDERAL FUND		Date of Receipt MM / DD / YYYY 03 / 04 / 2008
Mailing Address 301 S. COLLEGE ST. ATTENTION: WALTER S. PRICE		Transaction ID: SA11.831
City CHARLOTTE	State NC	Zip Code 28288
FEC ID number of contributing federal political committee. C C00012518		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.

Full Name (Last, First, Middle Initial) WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT		Date of Receipt MM / DD / YYYY 03 / 31 / 2008
Mailing Address 702 S.W. 8TH STREET		Transaction ID: SA11.963
City BENTONVILLE	State AR	Zip Code 72716
FEC ID number of contributing federal political committee. C C00093054		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	41500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 25
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) SENATE MAJORITY COMMITTEE		Date of Receipt MM / DD / YYYY 03 / 31 / 2008
	Mailing Address P.O. BOX 40177		Transaction ID: SA11.977
	City WASHINGTON	State DC	Zip Code 20016
	FEC ID number of contributing federal political committee. C C00396226		Amount of Each Receipt this Period 3832.65
	Name of Employer Occupation		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3832.65	SEE ATTRIBUTION BELOW

B.	Full Name (Last, First, Middle Initial) MR. PAUL STEELMAN		Date of Receipt MM / DD / YYYY 03 / 31 / 2008
	Mailing Address 3330 W. DESERT INN ROAD		Transaction ID: SA11.985
	City LAS VEGAS	State NV	Zip Code 89102-8441
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3833.33
	Name of Employer CHRISTIANN LTD. Occupation PARTNER		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3833.33	[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	▶	3832.65
TOTAL This Period (last page this line number only)	▶	3832.65

**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)
Battle Born PAC

A. Full Name (Last, First, Middle Initial) Erin Casey Mailing Address 514 G St, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Reimbursement-Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB13 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 163.43

B. Full Name (Last, First, Middle Initial) Erin Casey Mailing Address 514 G St, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB22 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 8
	Amount of Each Disbursement this Period 1143.62

C. Full Name (Last, First, Middle Initial) Erin Casey Mailing Address 514 G St, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1143.62

SUBTOTAL of Disbursements This Page (optional) ▶	2450.67
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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 16 / 25

<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)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) Cindy Hampton	Transaction ID: SB20 Date of Disbursement
	Mailing Address 2004 Slow Wind Street	<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City Las Vegas State NV Zip Code 89134	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1385.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Cindy Hampton	Transaction ID: SB21 Date of Disbursement
	Mailing Address 2004 Slow Wind Street	<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Las Vegas State NV Zip Code 89134	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="1385.25"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ron Steslow	Transaction ID: SB24 Date of Disbursement
	Mailing Address 5850 Cameron Run Terr Apt 1523	<input type="text" value="03"/> / <input type="text" value="13"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22303	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="183.97"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2954.47"/>
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)

PAGE 17 / 25

<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)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) Ron Steslow	Transaction ID: SB25 Date of Disbursement
	Mailing Address 5850 Cameron Run Terr Apt 1523	<input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22303	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="183.97"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) At&T Mobility	Transaction ID: SB19 Date of Disbursement
	Mailing Address PO Box 6463	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone	<input type="text" value="259.21"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) At&T Mobility	Transaction ID: SB4 Date of Disbursement
	Mailing Address PO Box 6463	<input type="text" value="03"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone	<input type="text" value="464.96"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="908.14"/>
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)

PAGE 18 / 25

<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)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial)
CD, Inc

Transaction ID: SB16
Date of Disbursement

Mailing Address PO Box 1877

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	0	8

City State Zip Code
Alexandria VA 22313

Amount of Each Disbursement this Period

Purpose of Disbursement

516.81

Website

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Chase Card Services

Transaction ID: SB5
Date of Disbursement

Mailing Address P.O. Box 9001074

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	8

City State Zip Code
Louisville KY 40290

Amount of Each Disbursement this Period

Purpose of Disbursement
See Below/Travel & Exps

1182.44

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Federal Express

Transaction ID: SB29
Date of Disbursement

Mailing Address PO Box 7221

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	8

City State Zip Code
Pasadena CA 91109

Amount of Each Disbursement this Period

Purpose of Disbursement
Shipping

25.39

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1699.25

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)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial)
IL Mulino

Mailing Address 1110 Vermont Avenue NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB30
Date of Disbursement

03 / 09 / 2008

Amount of Each Disbursement this Period

1117.03

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 7704 Leesburg Pike

City Falls Church State VA Zip Code 22043

Purpose of Disbursement
Computer Software

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB10
Date of Disbursement

03 / 09 / 2008

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)
CMDI

Mailing Address 7704 Leesburg Pike

City Falls Church State VA Zip Code 22043

Purpose of Disbursement
Computer Software

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB3
Date of Disbursement

03 / 06 / 2008

Amount of Each Disbursement this Period

248.00

SUBTOTAL of Disbursements This Page (optional) ▶

648.00

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)

PAGE 20 / 25

<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)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) CMDI	Transaction ID: SB8 Date of Disbursement 03 / 09 / 2008
	Mailing Address 7704 Leesburg Pike	Amount of Each Disbursement this Period 918.09
	City Falls Church State VA Zip Code 22043	
	Purpose of Disbursement Data Processing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Costco	Transaction ID: SB15 Date of Disbursement 03 / 24 / 2008
	Mailing Address 801 S. Pavilion Center Drive	Amount of Each Disbursement this Period 489.85
	City Las Vegas State NV Zip Code 89144	
	Purpose of Disbursement Office Equipment and Supplies	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DTI	Transaction ID: SB7 Date of Disbursement 03 / 09 / 2008
	Mailing Address 2814 Glendale Road	Amount of Each Disbursement this Period 500.00
	City Charlotte State NC Zip Code 28209	
	Purpose of Disbursement Mailer Design and Graphics	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1907.94
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)
Battle Born PAC

A. Full Name (Last, First, Middle Initial) Majority Strategies Mailing Address 135 Professional Drive Suite 104 City State Zip Code Ponte Vedra Beach FL 32082 Purpose of Disbursement PAC Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB14 Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2008
	Amount of Each Disbursement this Period 635.00 Category/Type

B. Full Name (Last, First, Middle Initial) Paychex Mailing Address 3060 Williams Dr #200 City State Zip Code Fairfax VA 22031 Purpose of Disbursement Payroll Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB26 Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2008
	Amount of Each Disbursement this Period 232.76 Category/Type

C. Full Name (Last, First, Middle Initial) Paychex Mailing Address 3060 Williams Dr #200 City State Zip Code Fairfax VA 22031 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB27 Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2008
	Amount of Each Disbursement this Period 839.23 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1706.99
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)
Battle Born PAC

<p>A. Full Name (Last, First, Middle Initial) Paychex</p> <p>Mailing Address 3060 Williams Dr #200</p> <p>City Fairfax State VA Zip Code 22031</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB28</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="819.23"/></p>
<p>B. Full Name (Last, First, Middle Initial) Precision Lists Inc</p> <p>Mailing Address 5653 Columbia Pike</p> <p>City Falls Church State VA Zip Code 22041</p> <p>Purpose of Disbursement Mailing List</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB6</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4653.39"/></p>
<p>C. Full Name (Last, First, Middle Initial) Southwest Publishing & Mailing Corporation</p> <p>Mailing Address 2600 NW Topeka Boulevard</p> <p>City Topeka State KS Zip Code 66617</p> <p>Purpose of Disbursement PAC Printing and Mailing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB9</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2008"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="9063.20"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 25

<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)
Battle Born PAC

A. Full Name (Last, First, Middle Initial) Taste Mailing Address 3516 Valley Drive City Alexandria State VA Zip Code 22302 Purpose of Disbursement PAC Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB2 Date of Disbursement 03 / 06 / 2008
	Amount of Each Disbursement this Period 861.57

B. Full Name (Last, First, Middle Initial) U.s. Postmaster Mailing Address 1611 Spring Gate Lane City Las Vegas State NV Zip Code 89134 Purpose of Disbursement Shipping & Postage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17 Date of Disbursement 03 / 26 / 2008
	Amount of Each Disbursement this Period 100.04

C. Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 17120 City Tucson State AZ Zip Code 85731 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB11 Date of Disbursement 03 / 11 / 2008
	Amount of Each Disbursement this Period 218.21

SUBTOTAL of Disbursements This Page (optional) ▶	1179.82
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 7901 Wisconsin Avenue

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Bank Fees

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB31

Date of Disbursement

/ /

Amount of Each Disbursement this Period

78.75

SUBTOTAL of Disbursements This Page (optional)

78.75

TOTAL This Period (last page this line number only)

28069.85

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)
Battle Born PAC

<p>A. Full Name (Last, First, Middle Initial) Heller For Congress</p> <p>Mailing Address 7840 Red Leaf Drive</p> <p>City Las Vegas State NV Zip Code 89131</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Dean Heller</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB12 Date of Disbursement 03 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 10000.00</p>
<p>B. Full Name (Last, First, Middle Initial) John McCain 2008</p> <p>Mailing Address PO Box 16118</p> <p>City Arlington State VA Zip Code 22215</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name John McCain</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB1 Date of Disbursement 03 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Porter For Congress</p> <p>Mailing Address 7840 Red Leaf Drive</p> <p>City Las Vegas State NV Zip Code 89131</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Jon Porter, Sr.</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB18 Date of Disbursement 03 / 28 / 2008</p> <p>Amount of Each Disbursement this Period 10000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

25000.00

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

25000.00