

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 POLITICAL ACTION COMMITTEE

ADDRESS (number and street) PO Box 40366
 Check if different than previously reported. (ACC)
Washington DC 20016

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 09 01 2007 through 09 30 2007

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 Christopher J. Ward

Signature of Treasurer Electronically Filed by Christopher J. Ward Date 11 19 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
BATTLE BORN POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="center">85399.80</td></tr></table>	85399.80
Y	Y	Y	Y									
2	0	0	7									
85399.80												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td align="center">51341.26</td></tr></table>	51341.26										
51341.26												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td align="center">54325.00</td></tr></table>	54325.00	<table border="1" style="width: 100%;"><tr><td align="center">247132.34</td></tr></table>	247132.34								
54325.00												
247132.34												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<table border="1" style="width: 100%;"><tr><td align="center">105666.26</td></tr></table>	105666.26	<table border="1" style="width: 100%;"><tr><td align="center">332532.14</td></tr></table>	332532.14								
105666.26												
332532.14												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td align="center">18938.70</td></tr></table>	18938.70	<table border="1" style="width: 100%;"><tr><td align="center">245804.58</td></tr></table>	245804.58								
18938.70												
245804.58												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td align="center">86727.56</td></tr></table>	86727.56	<table border="1" style="width: 100%;"><tr><td align="center">86727.56</td></tr></table>	86727.56								
86727.56												
86727.56												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table>	0.00										
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 POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	13000.00	44500.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	13000.00	44500.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	38000.00	177750.00
(c) Other Political Committees (such as PACs)	51000.00	222250.00
(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	3325.00	24882.34
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))	54325.00	247132.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	54325.00	247132.34

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.....	8938.70	108204.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	8938.70	108204.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	137500.00
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	100.00
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))..	18938.70	245804.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	18938.70	245804.58

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)	51000.00	222250.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	51000.00	222250.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8938.70	108204.58
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8938.70	108204.58

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 24
	<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	

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 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Margaret C. Binzer		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 5114 Cherokee Ave		Transaction ID: SA11A1.5359
City Alexandria	State VA	Zip Code 22312
Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		
Name of Employer McKenna Long	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Michael D. Bromberg		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 2101 Connecticut Ave NW #35		Transaction ID: SA11A1.5375
City Washington	State DC	Zip Code 20008
Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Capitol Health Group	Occupation Chairman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Shawn Coughlin		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 4401 Upland Dr		Transaction ID: SA11A1.5383
City Alexandria	State VA	Zip Code 22310
Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C		
Name of Employer Capitol Health Group	Occupation Principal	
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) ▶	3250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 24
	<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)
BATTLE BORN POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ashleigh De La Torre

Mailing Address 2456 20th St NW #507

City State Zip Code
Washington DC 20009

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

Name of Employer Occupation
Airport Council International Government Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y
09 28 2007

Transaction ID: SA11A1.5353

Amount of Each Receipt this Period
250.00

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

Mailing Address 3616 N Glebe Rd

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Biotechnology Ind Org Exec VP

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y
09 28 2007

Transaction ID: SA11A1.5367

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Frederick H. Graefe

Mailing Address 319 Constitution Ave NE

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation
Self Employed Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
M M / D D / Y Y Y Y Y
09 28 2007

Transaction ID: SA11A1.5369

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 24
	<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)
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. James W. Hawkins, III		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2007
Mailing Address 2604 N Nelson St		Transaction ID: SA11A1.5361
City Arlington	State VA	Zip Code 22207
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer Alpine Group	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Jennifer N. Higgins		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2007
Mailing Address 305 S Payne St #306		Transaction ID: SA11A1.5371
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Capitol Health Group	Occupation Sr Analyst	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. A. Malachi Mixon		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2007
Mailing Address 3105 Topping Ln		Transaction ID: SA11A1.5379
City Chagrin Falls	State OH	Zip Code 44022
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer Invacare Corp	Occupation Chm/CEO/President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 24
	<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)
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Barbara W. Mixon		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 3105 Topping Ln		Transaction ID: SA11A1.5377	
City State Zip Code Chagrin Falls OH 44022	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Helen R. Rhee		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 153 11th St NE		Transaction ID: SA11A1.5363	
City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Amgen	Occupation Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Shalla M. Ross		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 3616 N Glebe Rd		Transaction ID: SA11A1.5365	
City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Barbour Griffith Rogers	Occupation VP		
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) ▶	1750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 24
	<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)
BATTLE BORN POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Michael J. Ruggiero

Mailing Address 1305 N Lynnbrook Dr

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
Astellas Pharmaceuticals Sr Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11A1.5355

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Thomas A. Scully

Mailing Address 1801 Edgehill Dr

City State Zip Code
Alexandria VA 22307

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

Name of Employer Occupation
Fed of American Healthcare President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11A1.5381

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
R. Joseph Trauger

Mailing Address 4306 Robertson Blvd

City State Zip Code
Alexandria VA 22309

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

Name of Employer Occupation
AHA Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11A1.5357

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 24						
	(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

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NAME OF COMMITTEE (In Full)
BATTLE BORN POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Alexander N. Vogel

Mailing Address 10000 Mt Airy Rd

City Upperville State VA Zip Code 20184

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

Name of Employer Mehlman Vogel Castagenetti Occupation Lobbyist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	9	/	2	0	0	7

Transaction ID: SA11A1.5333

Amount of Each Receipt this Period
1500.00

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

Mailing Address 1685 Hunting Creek Dr

City Alexandria State VA Zip Code 22314

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

Name of Employer Accute Hospital Assoc Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	7

Transaction ID: SA11A1.5373

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	13000.00

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

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

FOR LINE NUMBER: PAGE 12 / 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. AIRCRAFT OWNERS AND PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 421 Aviation Way

City State Zip Code
Frederick MD 21701

FEC ID number of contributing federal political committee. **C** C00131185

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
09 / 27 / 2007

Transaction ID: SA11C.5338

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. HARRAH'S ENTERTAINMENT INC. IMPACTS PUBLIC POLICY

Mailing Address One Harrah's Ct.

City State Zip Code
Las Vegas NV 89119

FEC ID number of contributing federal political committee. **C** C00239947

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
09 / 19 / 2007

Transaction ID: SA11C.5327

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. KINDRED HEALTHCARE INC. PAC

Mailing Address 680 S. Fourth St.
ONE VENCOR PLACE

City State Zip Code
Louisville KY 40202

FEC ID number of contributing federal political committee. **C** C00242271

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2007

Transaction ID: SA11C.5340

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional) ► **12000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 24
	<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 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
MGI PHARMA INC PAC

Mailing Address 5775 WEST OLD SHAKOPEE RD STE 100

City State Zip Code
BLOOMINGTON MN 55437

FEC ID number of contributing federal political committee. **C** C00429886

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 28 / 2007

Transaction ID: SA11C.5335

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF PSYCHIATRIC HEALTH SYSTEMS POLITICAL ACTION COMMITTEE

Mailing Address 701 13TH STREET NW SUITE 950

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00107136

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2007

Transaction ID: SA11C.5345

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
National Restaurant Association PAC

Mailing Address 1200 17th Street NW

City State Zip Code
Washington DC 20036

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 19 / 2007

Transaction ID: SA11C.5330

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	▶	5500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 24
	<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 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
PSYCHIATRIC SOLUTIONS INC FED PAC

Mailing Address **840 CRESCENT CENTRE DRIVE STE 460**

City **FRANKLIN** State **TN** Zip Code **37067**

FEC ID number of contributing federal political committee. **C C00407684**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2007

Transaction ID: SA11C.5348

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
RETAIL INDUSTRY LEADERS ASSOCIATION POLITICAL ACTION COMMITTEE AKA RETAIL LEADERS

Mailing Address **1700 N. Moore Street Suite 2250**

City **ARLINGTON** State **VA** Zip Code **22209**

FEC ID number of contributing federal political committee. **C C00112763**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 19 / 2007

Transaction ID: SA11C.5331

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Union Pacific Corp. Fund for Effective Govt

Mailing Address **600 Thirteenth Street NW Suite 340**

City **Washington** State **DC** Zip Code **20005**

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2500.00**

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2007

Transaction ID: SA11C.5343

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	6500.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 15 / 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
BATTLE BORN POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. UNIVERSAL HEALTH SERVICES INC EMPLOYEES' GOOD GOVERNMENT FUND

Mailing Address 367 SOUTH GULPH ROAD

City State Zip Code
KING OF PRUSSIA PA 19406

FEC ID number of contributing federal political committee. **C** C00185520

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 27 / 2007

Transaction ID: SA11C.5350

Amount of Each Receipt this Period
2000.00

Full Name (Last, First, Middle Initial)
B. WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address 702 S.W. 8th Street

City State Zip Code
Bentonville AR 72716

FEC ID number of contributing federal political committee. **C** C00093054

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 Y
 09 / 19 / 2007

Transaction ID: SA11C.5328

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Wellpoint, Inc. PAC

Mailing Address 120 Monument Circle

City State Zip Code
Indianapolis IN 46204

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 27 / 2007

Transaction ID: SA11C.5344

Amount of Each Receipt this Period
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) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 24	
	(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"/> 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 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
WineandSpirits WholesalersofAmerica PAC

Mailing Address 805 Fifteenth Street NW
Suite 430

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4500.00

Date of Receipt

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

Transaction ID: SA11C.5342

Amount of Each Receipt this Period
4500.00

SUBTOTAL of Receipts This Page (optional)	▶	4500.00
TOTAL This Period (last page this line number only)	▶	38000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 24
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" 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 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Debbie S. Dean		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 7	
Mailing Address 6640 W Patrick Ln		Transaction ID: SA12.5385	
City State Zip Code Las Vegas NV 89118	Amount of Each Receipt this Period 1666.66		
FEC ID number of contributing federal political committee. C	SMC		
Name of Employer MJ Dean Construction	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. Robert Peccole		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 7 / 2 0 0 7	
Mailing Address 851 S Rampart Blvd Ste 205		Transaction ID: SA12.5387	
City State Zip Code Las Vegas NV 89145	Amount of Each Receipt this Period 1666.67		
FEC ID number of contributing federal political committee. C	SMC		
Name of Employer Peccole & Peccole LTD	Occupation Developer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ .00		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. SENATE MAJORITY COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 7	
Mailing Address PO Box 40177		Transaction ID: SA12.5337	
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 3325.00		
FEC ID number of contributing federal political committee. C C00396226	Transfer from Affiliated Committee		
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 24882.34		

SUBTOTAL of Receipts This Page (optional) ▶	3325.00
TOTAL This Period (last page this line number only) ▶	3325.00

**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)

PAGE 18 / 24

<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 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Transaction ID: SB21B.5305 Date of Disbursement																					
Mailing Address PO Box 6463		<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>9</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		0	4		2	0	0	7														
City Carol Stream	State IL	Zip Code 60197	Amount of Each Disbursement this Period																				
Purpose of Disbursement Phone Services		Category/ Type	756.32																				
Candidate Name																							
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Transaction ID: SB21B.5310 Date of Disbursement																					
Mailing Address PO Box 6463		<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>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		2	6		2	0	0	7														
City Carol Stream	State IL	Zip Code 60197	Amount of Each Disbursement this Period																				
Purpose of Disbursement Phone Services		Category/ Type	156.04																				
Candidate Name																							
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. Erin Casey		Transaction ID: SB21B.5317 Date of Disbursement																					
Mailing Address 514 G St, SE		<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>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	4		2	0	0	7														
City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll		Category/ Type	1139.62																				
Candidate Name																							
Office Sought:	Disbursement For:																						
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	2051.98
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 19 / 24

<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 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Erin Casey		Transaction ID: SB21B.5308 Date of Disbursement 09 / 21 / 2007	
Mailing Address 514 G St, SE		Amount of Each Disbursement this Period 22.00	
City Washington State DC Zip Code 20003	Purpose of Disbursement Travel Reimbursement	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) ▼		

Full Name (Last, First, Middle Initial) B. Erin Casey		Transaction ID: SB21B.5312 Date of Disbursement 09 / 28 / 2007	
Mailing Address 514 G St, SE		Amount of Each Disbursement this Period 628.49	
City Washington State DC Zip Code 20003	Purpose of Disbursement Travel Reimbursement	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) ▼		

Full Name (Last, First, Middle Initial) C. Erin Casey		Transaction ID: SB21B.5320 Date of Disbursement 09 / 28 / 2007	
Mailing Address 514 G St, SE		Amount of Each Disbursement this Period 1139.62	
City Washington State DC Zip Code 20003	Purpose of Disbursement Payroll	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) ▶	1790.11
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 20 / 24

<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 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. CD, Inc		Transaction ID: SB21B.5311 Date of Disbursement MM / DD / YYYY 09 / 26 / 2007	
Mailing Address PO Box 1877		Amount of Each Disbursement this Period 182.97	
City Alexandria State VA Zip Code 22313	Purpose of Disbursement Website Candidate Name	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) ▼		

Full Name (Last, First, Middle Initial) B. Chase Card Services		Transaction ID: SB21B.5304 Date of Disbursement MM / DD / YYYY 09 / 04 / 2007	
Mailing Address P.O. Box 9001074		Amount of Each Disbursement this Period 190.19	
City Louisville State KY Zip Code 40290	Purpose of Disbursement Credit Card (No entries itemize) Candidate Name	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) ▼		

Full Name (Last, First, Middle Initial) C. Cynthia Hampton		Transaction ID: SB21B.5318 Date of Disbursement MM / DD / YYYY 09 / 14 / 2007	
Mailing Address 2004 Slow Wind St		Amount of Each Disbursement this Period 692.62	
City Las Vegas State NV Zip Code 89134	Purpose of Disbursement Payroll Candidate Name	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) ▶	1065.78
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 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Cynthia Hampton		Transaction ID: SB21B.5321 Date of Disbursement 09 / 28 / 2007	
Mailing Address 2004 Slow Wind St		Amount of Each Disbursement this Period 692.62	
City Las Vegas	State NV	Zip Code 89134	Category/ Type
Purpose of Disbursement Payroll		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Brent Heberlee		Transaction ID: SB21B.5323 Date of Disbursement 09 / 12 / 2007	
Mailing Address 9605 Hall Rd		Amount of Each Disbursement this Period 680.00	
City Potomac	State MD	Zip Code 20854	Category/ Type
Purpose of Disbursement Fundraising Consultant Fees		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Paychex		Transaction ID: SB21B.5455 Date of Disbursement 09 / 10 / 2007	
Mailing Address 3060 Williams Dr #200		Amount of Each Disbursement this Period 244.64	
City Fairfax	State VA	Zip Code 22031	Category/ Type
Purpose of Disbursement Payroll Service		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1617.26
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 22 / 24

<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 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Paychex		Transaction ID: SB21B.5319 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 7
Mailing Address 3060 Williams Dr #200		Amount of Each Disbursement this Period 589.89
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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Paychex		Transaction ID: SB21B.5322 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 3060 Williams Dr #200		Amount of Each Disbursement this Period 589.89
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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Political Compliance Services		Transaction ID: SB21B.5309 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 7
Mailing Address PO Box 373		Amount of Each Disbursement this Period 1000.00
City State Zip Code Fairfax Station VA 22039	Purpose of Disbursement Compliance Fees 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) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2179.78
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

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 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731

Purpose of Disbursement
Phone Services

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5307

Date of Disbursement

/ /

Amount of Each Disbursement this Period

184.79

SUBTOTAL of Disbursements This Page (optional)

184.79

TOTAL This Period (last page this line number only)

8889.70

**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 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN BARRASSO

Mailing Address 6896 CASPER MOUNTAIN RD

City State Zip Code
CASPER WY 82601

Purpose of Disbursement

Candidate Name
FRIENDS OF JOHN BARRASSO

Office Sought: House Senate President
State: WY District: 00
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5301

Date of Disbursement

09 / 21 / 2007

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF JOHN BARRASSO

Mailing Address 6896 CASPER MOUNTAIN RD

City State Zip Code
CASPER WY 82601

Purpose of Disbursement

Candidate Name
FRIENDS OF JOHN BARRASSO

Office Sought: House Senate President
State: WY District: 00
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5303

Date of Disbursement

09 / 21 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00