

# 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  
REPUBLICAN MAJORITY CAMPAIGN

ADDRESS (number and street) 13421 MALENA DR  
 Check if different than previously reported. (ACC)  
SANTA ANA CA 92705

2. **FEC IDENTIFICATION NUMBER** C00442319  
**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 07 01 2009 through 12 31 2009

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 Randy Goodwin  
Signature of Treasurer Electronically Filed by Randy Goodwin Date 04 15 2010

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)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
REPUBLICAN MAJORITY CAMPAIGN

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		155626.78
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	49369.40									
(c) Total Receipts (from Line 19) .....	1092481.98	1698356.59								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1141851.38	1853983.37								
7. Total Disbursements (from Line 31) .....	896376.15	1608508.14								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	245475.23	245475.23								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
**REPUBLICAN MAJORITY CAMPAIGN**

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	15153.00	20279.06
(ii) Unitemized .....	1077328.98	1678077.53
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1092481.98	1698356.59
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	1092481.98	1698356.59
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	1092481.98	1698356.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1092481.98	1698356.59

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	876414.12	1577346.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	876414.12	1577346.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	15600.00
24. Independent Expenditure (use Schedule E) .....	14862.03	14862.03
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.....	100.00	700.00
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))..	896376.15	1608508.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	896376.15	1608508.14

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	1092481.98	1698356.59
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1092481.98	1698356.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	876414.12	1577346.11
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	876414.12	1577346.11

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 100  
(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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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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial) Michael Abdalla		Date of Receipt MM / DD / YYYY 10 / 28 / 2009
Mailing Address 4022 E Rolling Green Lane		Transaction ID: SA11AI.5046
City Orange	State CA	Zip Code 92867
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.00
Name of Employer Refused	Occupation Refused	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

**B.**

Full Name (Last, First, Middle Initial) Gary Adams		Date of Receipt MM / DD / YYYY 10 / 21 / 2009
Mailing Address 3420-H W MacArthur Blvd		Transaction ID: SA11AI.5088
City Santa Ana	State CA	Zip Code 92704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 119.00
Name of Employer Adams Properties	Occupation President	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 263.00	

**C.**

Full Name (Last, First, Middle Initial) Gary Adams		Date of Receipt MM / DD / YYYY 10 / 27 / 2009
Mailing Address 3420-H W MacArthur Blvd		Transaction ID: SA11AI.5089
City Santa Ana	State CA	Zip Code 92704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 119.00
Name of Employer Adams Properties	Occupation President	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 382.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	448.00
<b>TOTAL</b> 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 / 100  
(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)  
**REPUBLICAN MAJORITY CAMPAIGN**

**A.**

Full Name (Last, First, Middle Initial) Gary Adams		Date of Receipt MM / DD / YYYY 11 / 07 / 2009
Mailing Address 3420-H W MacArthur Blvd		<b>Transaction ID:</b> SA11AI.5090
City Santa Ana	State CA	Zip Code 92704
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 144.00
Name of Employer Adams Properties	Occupation President	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 526.00	

**B.**

Full Name (Last, First, Middle Initial) Russell Alston		Date of Receipt MM / DD / YYYY 08 / 24 / 2009
Mailing Address 1523 Hollencrest Dr		<b>Transaction ID:</b> SA11AI.5032
City West Covina	State CA	Zip Code 91791
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer None	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

**C.**

Full Name (Last, First, Middle Initial) Dolores Arroyo		Date of Receipt MM / DD / YYYY 10 / 21 / 2009
Mailing Address 3327 Current Ct		<b>Transaction ID:</b> SA11AI.5071
City Reno	State NV	Zip Code 89509
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer None	Occupation Homemaker	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1244.00</b>
<b>TOTAL</b> 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 / 100
	<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)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b>	Full Name (Last, First, Middle Initial) Alexander Asprodites		Date of Receipt
	Mailing Address 1750 St. Charles Ave #413		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 09 / 2009
	City	State	Zip Code
	New Orleans	LA	70130
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5036
Name of Employer Refused		Occupation Refused	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 125.00
		<input type="text"/> 250.00	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Byron Bader		Date of Receipt
	Mailing Address 38242 Redwood Terr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 12 / 18 / 2009
	City	State	Zip Code
	Fremont	CA	94536
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5215
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 119.00
		<input type="text"/> 238.00	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Jo Ann Baughman		Date of Receipt
	Mailing Address P.O. Box 1269		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 11 / 07 / 2009
	City	State	Zip Code
	Philomath	OR	97370
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5224
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 59.00
		<input type="text"/> 237.00	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 303.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.** Full Name (Last, First, Middle Initial)  
Jo Ann Baughman

Mailing Address P.O. Box 1269

City Philomath State OR Zip Code 97370

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt 12 / 20 / 2009

Transaction ID: SA11AI.5226

Amount of Each Receipt this Period 39.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Gerald Bell

Mailing Address 8980 S Hollybrook Dr

City Pembroke Pines State FL Zip Code 33025

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 263.00

Date of Receipt 12 / 20 / 2009

Transaction ID: SA11AI.5186

Amount of Each Receipt this Period 119.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Daniel Biery

Mailing Address 17 Needham Ave

City Phelps State NY Zip Code 14532

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

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt 11 / 05 / 2009

Transaction ID: SA11AI.5148

Amount of Each Receipt this Period 119.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 277.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
Edward Blackburne

Mailing Address PO Box 2039

City Conroe State TX Zip Code 77305

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

Name of Employer Tubular Perforating Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.00

Date of Receipt: 11 / 07 / 2009  
**Transaction ID:** SA11AI.5161  
 Amount of Each Receipt this Period: 119.00  
 Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Kay Boie

Mailing Address 109 Highmore Ave

City Anna State IL Zip Code 62906

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 12 / 24 / 2009  
**Transaction ID:** SA11AI.5053  
 Amount of Each Receipt this Period: 250.00  
 Contributor

**C.**

Full Name (Last, First, Middle Initial)  
Emily Bourne

Mailing Address 8 Wildhorse Lane

City Rolling Hills Est State CA Zip Code 90274

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

Name of Employer Refused Occupation Refused

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 29 / 2009  
**Transaction ID:** SA11AI.5057  
 Amount of Each Receipt this Period: 75.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **444.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
Emily Bourne

Mailing Address 8 Wildhorse Lane

City State Zip Code  
Rolling Hills Est CA 90274

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

Name of Employer Refused Occupation Refused

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

**Transaction ID:** SA11AI.5058

Amount of Each Receipt this Period  
100.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Brian Broadwater

Mailing Address 5665 Middleburg Rd

City State Zip Code  
Union Bridge MD 21791

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 9

**Transaction ID:** SA11AI.5237

Amount of Each Receipt this Period  
119.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Larry Brown

Mailing Address 801 Brentwood Point

City State Zip Code  
Naples FL 34110

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

Name of Employer Brown Distribution Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 0 / 2 0 0 9

**Transaction ID:** SA11AI.5076

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **719.00**

**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 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
Carol Franc Buck

Mailing Address PO Box 1307

City State Zip Code  
Crystal Bay NV 89402

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

Name of Employer Occupation  
Buck Foundation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 267.00

Date of Receipt  
MM / DD / YYYY  
12 / 21 / 2009

Transaction ID: SA11AI.5118

Amount of Each Receipt this Period  
119.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Clifford Cone

Mailing Address Post Office Drawer 1629

City State Zip Code  
Lovington NM 88260

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

Name of Employer Occupation  
Self CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 263.00

Date of Receipt  
MM / DD / YYYY  
12 / 19 / 2009

Transaction ID: SA11AI.5132

Amount of Each Receipt this Period  
119.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Clifford Cone

Mailing Address Post Office Drawer 1629

City State Zip Code  
Lovington NM 88260

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

Name of Employer Occupation  
Self CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 382.00

Date of Receipt  
MM / DD / YYYY  
12 / 20 / 2009

Transaction ID: SA11AI.5131

Amount of Each Receipt this Period  
119.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **357.00**

**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 / 100  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

**A.** Full Name (Last, First, Middle Initial)  
Susan Costanzo

Mailing Address 3 Sailcrest

City State Zip Code  
Newport Coast CA 92657

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

Name of Employer None Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 203.00

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2009

**Transaction ID:** SA11AI.5211

Amount of Each Receipt this Period  
59.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Clifford Crane

Mailing Address 3610 Birch St

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Self Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2009

**Transaction ID:** SA11AI.5121

Amount of Each Receipt this Period  
119.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Dimples Crosby

Mailing Address PO Box 1489

City State Zip Code  
Larose LA 70373

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

Name of Employer CD Products Occupation Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2009

**Transaction ID:** SA11AI.5142

Amount of Each Receipt this Period  
144.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **322.00**

**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 14 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
William Davis

Mailing Address 2312 Estates Dr

City State Zip Code  
Fairfield CA 94533

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 207.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 9

**Transaction ID:** SA11AI.5108

Amount of Each Receipt this Period  
29.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Jolee Deaver

Mailing Address 3531 Timber Dr

City State Zip Code  
Amarillo TX 79121

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

Name of Employer None Occupation Retired Nurse

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 9

**Transaction ID:** SA11AI.5040

Amount of Each Receipt this Period  
400.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Randy Dittman

Mailing Address 4501 W41st St

City State Zip Code  
Tulsa OK 74107

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 1 1 / 2 0 0 9

**Transaction ID:** SA11AI.5042

Amount of Each Receipt this Period  
350.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **779.00**

**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 15 / 100
	<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)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b>	Full Name (Last, First, Middle Initial) Anne Dornbush		Date of Receipt
	Mailing Address 16365 Las Cumbres Dr		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 9 / 2 0 0 9
	City	State	Zip Code
	Whittier	CA	90603
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5234
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 119.00
		<input type="text"/> 316.00	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Josie Falbo		Date of Receipt
	Mailing Address 2847 S Buckingham		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 6 / 2 0 0 9
	City	State	Zip Code
	Westchester	IL	60154
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5199
Name of Employer Self		Occupation Musician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 119.00
		<input type="text"/> 238.00	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Josie Falbo		Date of Receipt
	Mailing Address 2847 S Buckingham		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 0 8 / 2 0 0 9
	City	State	Zip Code
	Westchester	IL	60154
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5200
Name of Employer Self		Occupation Musician	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 29.00
		<input type="text"/> 267.00	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 267.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 16 / 100  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

**A.** Full Name (Last, First, Middle Initial)  
Josie Falbo  
Mailing Address 2847 S Buckingham  
City Westchester State IL Zip Code 60154  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Musician  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 286.00  
Date of Receipt 12 / 20 / 2009  
Transaction ID: SA11AI.5201  
Amount of Each Receipt this Period 19.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Ida Fernandez  
Mailing Address 7000 Village Way  
City Boothwyn State PA Zip Code 19061  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Homemaker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 288.00  
Date of Receipt 12 / 18 / 2009  
Transaction ID: SA11AI.5193  
Amount of Each Receipt this Period 144.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
W. Claude Fillingim  
Mailing Address 275 Franklindale Rd  
City Thomaston State GA Zip Code 30286  
FEC ID number of contributing federal political committee. **C**  
Name of Employer United Methodist Church Occupation Minister  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 238.00  
Date of Receipt 11 / 06 / 2009  
Transaction ID: SA11AI.5124  
Amount of Each Receipt this Period 119.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 282.00  
**TOTAL** This Period (last page this line number only) ..... ►



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial) William Thomas Flynn		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 55-05 Woodside Ave		<b>Transaction ID:</b> SA11AI.5183
City Woodside	State NY	Zip Code 11377
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 144.00
Name of Employer None	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00	

**B.**

Full Name (Last, First, Middle Initial) Robert Gehring		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 183 Sunset View		<b>Transaction ID:</b> SA11AI.5229
City Doylestown	State PA	Zip Code 18901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 119.00
Name of Employer None	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.00	

**C.**

Full Name (Last, First, Middle Initial) Carlton Graziano		Date of Receipt MM / DD / YYYY 10 / 09 / 2009
Mailing Address 425 E 58th St		<b>Transaction ID:</b> SA11AI.5059
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Business	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	763.00
<b>TOTAL</b> 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 18 / 100

(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)

Richard Griffith

Mailing Address 3417 Milam St

City State Zip Code  
Houston TX 77002

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

Name of Employer Self Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 288.00

Date of Receipt

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

Transaction ID: SA11AI.5189

Amount of Each Receipt this Period

144.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Richard Griffith

Mailing Address 3417 Milam St

City State Zip Code  
Houston TX 77002

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

Name of Employer Self Occupation Investor

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 432.00

Date of Receipt

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

Transaction ID: SA11AI.5190

Amount of Each Receipt this Period

144.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

D. G. Gumpertz

Mailing Address PO Box 2450

City State Zip Code  
Toluca Lake CA 91610

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 263.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.5145

Amount of Each Receipt this Period

144.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

432.00

**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 19 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial) Lester Hauri		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 552 University Dr		<b>Transaction ID:</b> SA11AI.5240
City Woodland Park	State CO	Zip Code 80863
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 119.00
Name of Employer Self	Occupation Appraiser	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.00	

**B.**

Full Name (Last, First, Middle Initial) Pamela Hazard		Date of Receipt MM / DD / YYYY 12 / 21 / 2009
Mailing Address 6306 Napa Ave		<b>Transaction ID:</b> SA11AI.5063
City Alta Loma	State CA	Zip Code 91701
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Union Bank	Occupation Teller	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**C.**

Full Name (Last, First, Middle Initial) John Heinz		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 518 Bell St		<b>Transaction ID:</b> SA11AI.5205
City Edmonds	State WA	Zip Code 98020
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 119.00
Name of Employer Info Requested	Occupation Info Requested	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>438.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 20 / 100  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

**A.** Full Name (Last, First, Middle Initial)  
Lou Higginbotham  
Mailing Address 4304 Westway Ave  
City Dallas State TX Zip Code 75205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 07 / 16 / 2009  
Transaction ID: SA11AI.5044  
Amount of Each Receipt this Period 500.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Lou Higginbotham  
Mailing Address 4304 Westway Ave  
City Dallas State TX Zip Code 75205  
FEC ID number of contributing federal political committee. **C**  
Name of Employer None Occupation Retired  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 600.00  
Date of Receipt 12 / 18 / 2009  
Transaction ID: SA11AI.5064  
Amount of Each Receipt this Period 100.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Ronald Kelly  
Mailing Address 1428 Ox Bottom Rd  
City Tallahassee State FL Zip Code 32312  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Business  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 12 / 21 / 2009  
Transaction ID: SA11AI.5078  
Amount of Each Receipt this Period 500.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial) James Kent		Date of Receipt MM / DD / YYYY 11 / 06 / 2009
Mailing Address 5201 Los Altos Dr		<b>Transaction ID:</b> SA11AI.5208
City Yorba Linda	State CA	Zip Code 92886
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 119.00
Name of Employer None	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 238.00	

**B.**

Full Name (Last, First, Middle Initial) Robert Knabe		Date of Receipt MM / DD / YYYY 12 / 18 / 2009
Mailing Address 710 Patchester		<b>Transaction ID:</b> SA11AI.5252
City Houston	State TX	Zip Code 77079
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 49.00
Name of Employer None	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.00	

**C.**

Full Name (Last, First, Middle Initial) Robert Knabe		Date of Receipt MM / DD / YYYY 12 / 22 / 2009
Mailing Address 710 Patchester		<b>Transaction ID:</b> SA11AI.5251
City Houston	State TX	Zip Code 77079
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 49.00
Name of Employer None	Occupation Retired	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	217.00
<b>TOTAL</b> 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 22 / 100  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

**A.** Full Name (Last, First, Middle Initial)  
Robert Kramer  
 Mailing Address 1233 N Gulfstream Ave Unit 140  
 City State Zip Code  
 Sarasota FL 34236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Business  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00  
 Date of Receipt 10 / 02 / 2009  
**Transaction ID:** SA11AI.5065  
 Amount of Each Receipt this Period 600.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
Robert Kramer  
 Mailing Address 1233 N Gulfstream Ave Unit 140  
 City State Zip Code  
 Sarasota FL 34236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Business  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00  
 Date of Receipt 10 / 20 / 2009  
**Transaction ID:** SA11AI.5067  
 Amount of Each Receipt this Period 100.00  
 Contributions

**C.** Full Name (Last, First, Middle Initial)  
Robert Kramer  
 Mailing Address 1233 N Gulfstream Ave Unit 140  
 City State Zip Code  
 Sarasota FL 34236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Business  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1300.00  
 Date of Receipt 11 / 03 / 2009  
**Transaction ID:** SA11AI.5068  
 Amount of Each Receipt this Period 600.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1300.00  
**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 23 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
Robert Kramer

Mailing Address 1233 N Gulfstream Ave Unit 140

City Sarasota State FL Zip Code 34236

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

Name of Employer Self Occupation Business

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1900.00

Date of Receipt: 12 / 22 / 2009  
**Transaction ID:** SA11AI.5069  
 Amount of Each Receipt this Period: 600.00  
 Contribution

**B.**

Full Name (Last, First, Middle Initial)  
J. Orville Larsen

Mailing Address 1629 Japonica Lane

City Plano State TX Zip Code 75074

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.00

Date of Receipt: 11 / 08 / 2009  
**Transaction ID:** SA11AI.5093  
 Amount of Each Receipt this Period: 144.00  
 Contribution

**C.**

Full Name (Last, First, Middle Initial)  
J. Orville Larsen

Mailing Address 1629 Japonica Lane

City Plano State TX Zip Code 75074

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 407.00

Date of Receipt: 12 / 24 / 2009  
**Transaction ID:** SA11AI.5094  
 Amount of Each Receipt this Period: 144.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **888.00**

**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 24 / 100

(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
Anita Manuel

Mailing Address 44 Coconut Row

City State Zip Code  
Palm Beach FL 33480

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

Name of Employer Occupation  
A E Manuel & Associates Tax Consultant

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 238.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.5085

Amount of Each Receipt this Period

119.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Cecil Meadows

Mailing Address 930 Koae St

City State Zip Code  
Honolulu HI 96816

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

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

Transaction ID: SA11AI.5245

Amount of Each Receipt this Period

100.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Cecil Meadows

Mailing Address 930 Koae St

City State Zip Code  
Honolulu HI 96816

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 444.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.5241

Amount of Each Receipt this Period

144.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

363.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 100  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

**A.** Full Name (Last, First, Middle Initial)  
Edward Melberg  
 Mailing Address 1318 Breezy Bend Dr  
 City Katy State TX Zip Code 77494  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.00  
 Date of Receipt 11 / 07 / 2009  
**Transaction ID:** SA11AI.5103  
 Amount of Each Receipt this Period 119.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
David Melville  
 Mailing Address 30 Colpitts Rd  
 City Weston State MA Zip Code 02493  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Palmer & Corbett Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 218.00  
 Date of Receipt 11 / 06 / 2009  
**Transaction ID:** SA11AI.5138  
 Amount of Each Receipt this Period 99.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
David Melville  
 Mailing Address 30 Colpitts Rd  
 City Weston State MA Zip Code 02493  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Palmer & Corbett Occupation Executive  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 337.00  
 Date of Receipt 12 / 18 / 2009  
**Transaction ID:** SA11AI.5139  
 Amount of Each Receipt this Period 119.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 337.00  
**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 26 / 100

(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)

Carroll Mueller

Mailing Address 2800 Mason Ave

City State Zip Code  
Las Vegas NV 89102

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 238.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.5114

Amount of Each Receipt this Period

119.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)

Ernest Nicolay

Mailing Address 29875 Bradmoor Ct

City State Zip Code  
Farmington Hills MI 48334

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 238.00

Date of Receipt

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

Transaction ID: SA11AI.5158

Amount of Each Receipt this Period

119.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)

Donna Noll

Mailing Address 1905 Corta Bella Dr

City State Zip Code  
Las Vegas NV 89134

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

Name of Employer Occupation  
Century 21 Salesperson

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 238.00

Date of Receipt

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

Transaction ID: SA11AI.5154

Amount of Each Receipt this Period

119.00

Contribution

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

357.00

**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 27 / 100
	<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)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b>	Full Name (Last, First, Middle Initial) Donna Noll		Date of Receipt
	Mailing Address 1905 Corta Bella Dr		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Las Vegas	NV	89134
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5155
Name of Employer Century 21		Occupation Salesperson	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="267.00"/>	<input type="text" value="29.00"/>
			Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr. L L Pallos		Date of Receipt
	Mailing Address 1872 St Timothy Dr		<input type="text" value="12"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Green Hills	GA	30329
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5216
Name of Employer ATSDR		Occupation Statistician/Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="238.00"/>	<input type="text" value="119.00"/>
			Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Dr. L L Pallos		Date of Receipt
	Mailing Address 1872 St Timothy Dr		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Green Hills	GA	30329
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5218
Name of Employer ATSDR		Occupation Statistician/Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="257.00"/>	<input type="text" value="19.00"/>
			Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="167.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
Charles Patterson

Mailing Address 284 Park Lane

City State Zip Code  
Roseburg OR 97471

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

Name of Employer Self Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2009

**Transaction ID:** SA11AI.5135

Amount of Each Receipt this Period  
99.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Paulette Perkins

Mailing Address 415 Lacet Lane

City State Zip Code  
Aspen CO 81611

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
MM / DD / YYYY  
11 / 24 / 2009

**Transaction ID:** SA11AI.5258

Amount of Each Receipt this Period  
144.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Edward Phelan

Mailing Address 1049 Pecan Grove

City State Zip Code  
Lawrenceville GA 30046

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 267.00

Date of Receipt  
MM / DD / YYYY  
12 / 18 / 2009

**Transaction ID:** SA11AI.5165

Amount of Each Receipt this Period  
119.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **362.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 100  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

**A.** Full Name (Last, First, Middle Initial)  
Verna Eileen Radcliffe  
 Mailing Address 1212 Mohawk Lane  
 City State Zip Code  
 St. Joseph MI 49085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 263.00  
 Date of Receipt MM / DD / YYYY  
 11 / 06 / 2009  
**Transaction ID:** SA11AI.5261  
 Amount of Each Receipt this Period 144.00  
 Contribution

**B.** Full Name (Last, First, Middle Initial)  
Verna Eileen Radcliffe  
 Mailing Address 1212 Mohawk Lane  
 City State Zip Code  
 St. Joseph MI 49085  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 292.00  
 Date of Receipt MM / DD / YYYY  
 11 / 21 / 2009  
**Transaction ID:** SA11AI.5262  
 Amount of Each Receipt this Period 29.00  
 Contribution

**C.** Full Name (Last, First, Middle Initial)  
James Randle  
 Mailing Address 2464 Bear Den Rd  
 City State Zip Code  
 Frederick MD 21701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer None Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 238.00  
 Date of Receipt MM / DD / YYYY  
 12 / 20 / 2009  
**Transaction ID:** SA11AI.5168  
 Amount of Each Receipt this Period 119.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 292.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 30 / 100  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

**A.** Full Name (Last, First, Middle Initial)  
Don Robertson

Mailing Address 1221 W Coast Hwy

City State Zip Code  
Newport Beach CA 92663

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

Name of Employer None Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 9

**Transaction ID:** SA11AI.5151

Amount of Each Receipt this Period  
119.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Cindy Rolence

Mailing Address 1774 215th St

City State Zip Code  
Red Oak IA 51566

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

Name of Employer None Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 218.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 9

**Transaction ID:** SA11AI.5196

Amount of Each Receipt this Period  
99.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Cliff Russell

Mailing Address Box 772809

City State Zip Code  
Steamboat Springs CO 80477

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

Name of Employer Self Occupation CEO-R & R Leasing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

**Transaction ID:** SA11AI.5127

Amount of Each Receipt this Period  
144.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **362.00**

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

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

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

FOR LINE NUMBER: PAGE 31 / 100  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

**A.** Full Name (Last, First, Middle Initial)  
Britt Smith

Mailing Address 6424 Pemberton Dr

City State Zip Code  
Dallas TX 75230

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

Name of Employer Occupation  
Picasso Softward Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2009

**Transaction ID:** SA11AI.5255

Amount of Each Receipt this Period  
119.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Brian Spaulding

Mailing Address 1503 Stevens Creek Dr

City State Zip Code  
North Augusta SC 29860

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 263.00

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2009

**Transaction ID:** SA11AI.5111

Amount of Each Receipt this Period  
144.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Barbara Taylor

Mailing Address 2 River Bend Circle

City State Zip Code  
Exeter NH 03833

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 238.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2009

**Transaction ID:** SA11AI.5095

Amount of Each Receipt this Period  
119.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **382.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 100

(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
Barbara Taylor

Mailing Address 2 River Bend Circle

City State Zip Code  
Exeter NH 03833

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
297.00

Date of Receipt

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

Transaction ID: SA11AI.5097

Amount of Each Receipt this Period

59.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
Barbara Taylor

Mailing Address 2 River Bend Circle

City State Zip Code  
Exeter NH 03833

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
336.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.5099

Amount of Each Receipt this Period

39.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Barbara Taylor

Mailing Address 2 River Bend Circle

City State Zip Code  
Exeter NH 03833

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

Name of Employer Occupation  
None Homemaker

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
385.00

Date of Receipt

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

Transaction ID: SA11AI.5098

Amount of Each Receipt this Period

49.00

Contribution

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

147.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 100
	<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)  
**REPUBLICAN MAJORITY CAMPAIGN**

<b>A.</b>	Full Name (Last, First, Middle Initial) Bradley Tillman		Date of Receipt
	Mailing Address 3922 Grape Creek Rd		<input type="text" value="12"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	San Angelo	TX	76903
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5082
Name of Employer Info requested		Occupation Info requested	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="219.00"/>	Contribution

<b>B.</b>	Full Name (Last, First, Middle Initial) Patricia Vazirani		Date of Receipt
	Mailing Address 13260 E Summit Dr		<input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Scottsdale	AR	85259
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5171
Name of Employer Self		Occupation Real Estate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="144.00"/>
		<input type="text" value="263.00"/>	Contribution

<b>C.</b>	Full Name (Last, First, Middle Initial) Patricia Vazirani		Date of Receipt
	Mailing Address 13260 E Summit Dr		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Scottsdale	AR	85259
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.5172
Name of Employer Self		Occupation Real Estate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="49.00"/>
		<input type="text" value="312.00"/>	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="293.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 100  
(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
William C Vinet, Jr.

Mailing Address 45-090

City Kaneohe State HI Zip Code 96744

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 222.00

Date of Receipt: 11 / 19 / 2009  
**Transaction ID: SA11AI.5271**  
 Amount of Each Receipt this Period: 29.00  
 Contribution

**B.**

Full Name (Last, First, Middle Initial)  
William C Vinet, Jr.

Mailing Address 45-090

City Kaneohe State HI Zip Code 96744

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 322.00

Date of Receipt: 12 / 09 / 2009  
**Transaction ID: SA11AI.5270**  
 Amount of Each Receipt this Period: 100.00  
 Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Ken Wilson

Mailing Address 7015 Field Hill Rd

City Raleigh State NC Zip Code 27603

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

Name of Employer None Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 292.00

Date of Receipt: 12 / 21 / 2009  
**Transaction ID: SA11AI.5176**  
 Amount of Each Receipt this Period: 144.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► **273.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 100

(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)  
REPUBLICAN MAJORITY CAMPAIGN

**A.**

Full Name (Last, First, Middle Initial)  
John F. Woodhouse

Mailing Address 650 Ramblewood Rd

City State Zip Code  
Houston TX 77079

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.5073

Amount of Each Receipt this Period

1000.00

Contribution

**B.**

Full Name (Last, First, Middle Initial)  
James Hugh Wright

Mailing Address 219 Eagle Pass Dr

City State Zip Code  
New Braunfels TX 78130

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

Name of Employer Occupation  
None Retired

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 238.00

Date of Receipt

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

Transaction ID: SA11AI.5180

Amount of Each Receipt this Period

119.00

Contribution

**C.**

Full Name (Last, First, Middle Initial)  
Vincent Zedler

Mailing Address 8993 Acorn Landing

City State Zip Code  
Germantown TN 38139

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

Name of Employer Occupation  
Federal Express Pilot

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 238.00

Date of Receipt

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

Transaction ID: SA11AI.5266

Amount of Each Receipt this Period

119.00

Contribution

**SUBTOTAL** of Receipts This Page (optional) .....

1238.00

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

15153.00

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Amazon	Transaction ID: SB21B.4817 Date of Disbursement 07 / 03 / 2009
	Mailing Address PO Box 81225	Amount of Each Disbursement this Period 60.00
	City Seattle State WA Zip Code 98108	
	Purpose of Disbursement Books	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) Amazon	Transaction ID: SB21B.4923 Date of Disbursement 10 / 22 / 2009
	Mailing Address PO Box 81225	Amount of Each Disbursement this Period 21.72
	City Seattle State WA Zip Code 98108	
	Purpose of Disbursement Book	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) Amazon	Transaction ID: SB21B.4926 Date of Disbursement 10 / 26 / 2009
	Mailing Address PO Box 81225	Amount of Each Disbursement this Period 14.85
	City Seattle State WA Zip Code 98108	
	Purpose of Disbursement Book	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	96.57
<b>TOTAL</b> 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 37 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Amazon Mailing Address PO Box 81225 City Seattle State WA Zip Code 98108 Purpose of Disbursement Software 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: SB21B.4927 Date of Disbursement 10 / 26 / 2009	Amount of Each Disbursement this Period 38.01
B.	Full Name (Last, First, Middle Initial) America Caging, Inc. Mailing Address 4850 Wright Rd City Stafford State TX Zip Code 77477 Purpose of Disbursement Caging 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: SB21B.5273 Date of Disbursement 08 / 28 / 2009	Amount of Each Disbursement this Period 502.74
C.	Full Name (Last, First, Middle Initial) America Caging, Inc. Mailing Address 4850 Wright Rd City Stafford State TX Zip Code 77477 Purpose of Disbursement Postage, Mailing Service 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: SB21B.5275 Date of Disbursement 09 / 01 / 2009	Amount of Each Disbursement this Period 386.25

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

927.00

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 38 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) America Caging, Inc.	Transaction ID: SB21B.5277 Date of Disbursement
	Mailing Address 4850 Wright Rd	<input type="text" value="09"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period
	Purpose of Disbursement Caging	<input type="text" value="523.63"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) America Caging, Inc.	Transaction ID: SB21B.5280 Date of Disbursement
	Mailing Address 4850 Wright Rd	<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period
	Purpose of Disbursement Caging	<input type="text" value="241.61"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) America Caging, Inc.	Transaction ID: SB21B.5281 Date of Disbursement
	Mailing Address 4850 Wright Rd	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period
	Purpose of Disbursement Caging	<input type="text" value="380.52"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1145.76"/>
<b>TOTAL</b> 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 39 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) America Caging, Inc.	Transaction ID: SB21B.5282 Date of Disbursement
	Mailing Address 4850 Wright Rd	<input type="text" value="10"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period
	Purpose of Disbursement Caging	<input type="text" value="437.89"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) America Caging, Inc.	Transaction ID: SB21B.5283 Date of Disbursement
	Mailing Address 4850 Wright Rd	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Stafford State TX Zip Code 77477	Amount of Each Disbursement this Period
	Purpose of Disbursement Caging	<input type="text" value="248.57"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.4815 Date of Disbursement
	Mailing Address PO Box 360001	<input type="text" value="07"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ft Lauderdale State FL Zip Code 33336	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Account Fee	<input type="text" value="5.95"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="692.41"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.4806 Date of Disbursement
	Mailing Address PO Box 360001	<input type="text" value="07"/> <input type="text" value="20"/> <input type="text" value="2009"/>
	City Ft Lauderdale State FL Zip Code 33336	Amount of Each Disbursement this Period
	Purpose of Disbursement Meeting Expense	<input type="text" value="10.97"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.4846 Date of Disbursement
	Mailing Address PO Box 360001	<input type="text" value="08"/> <input type="text" value="04"/> <input type="text" value="2009"/>
	City Ft Lauderdale State FL Zip Code 33336	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Account Fee	<input type="text" value="5.95"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB21B.4871 Date of Disbursement
	Mailing Address PO Box 360001	<input type="text" value="09"/> <input type="text" value="03"/> <input type="text" value="2009"/>
	City Ft Lauderdale State FL Zip Code 33336	Amount of Each Disbursement this Period
	Purpose of Disbursement Merchant Account Fee	<input type="text" value="5.95"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="22.87"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Ft Lauderdale State FL Zip Code 33336 Purpose of Disbursement Merchant Account Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4911 Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 5.95
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>B.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Ft Lauderdale State FL Zip Code 33336 Purpose of Disbursement Merchant Account Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4944 Date of Disbursement 11 / 03 / 2009
	Amount of Each Disbursement this Period 5.95
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>C.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City Ft Lauderdale State FL Zip Code 33336 Purpose of Disbursement Merchant Account Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: SB21B.4963 Date of Disbursement 12 / 03 / 2009
	Amount of Each Disbursement this Period 5.95
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	17.85
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.4797 Date of Disbursement
	Mailing Address PO Box 78225	<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85062	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone	<input type="text" value="43.01"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.4844 Date of Disbursement
	Mailing Address PO Box 78225	<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85062	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone	<input type="text" value="124.49"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.4835 Date of Disbursement
	Mailing Address PO Box 78225	<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85062	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone	<input type="text" value="43.01"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="210.51"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.4915 Date of Disbursement
	Mailing Address PO Box 78225	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Phoenix State AZ Zip Code 85062	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone	<input type="text" value="52.34"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.4982 Date of Disbursement
	Mailing Address PO Box 78225	<input type="text" value="12"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Phoenix State AZ Zip Code 85062	Amount of Each Disbursement this Period
	Purpose of Disbursement Telephone	<input type="text" value="43.03"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Mrs Nancy Benninghoff	Transaction ID: SB21B.4814 Date of Disbursement
	Mailing Address PO Box 2806	<input type="text" value="07"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Rncho Cuca State CA Zip Code 91629	Amount of Each Disbursement this Period
	Purpose of Disbursement Web Design & Management	<input type="text" value="2800.00"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2895.37"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b>	Full Name (Last, First, Middle Initial) Mrs Nancy Benninghoff <hr/> Mailing Address PO Box 2806 <hr/> City Rncho Cuca State CA Zip Code 91629 <hr/> Purpose of Disbursement Web Design & Management Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4838 Date of Disbursement 08 / 15 / 2009 <hr/> Amount of Each Disbursement this Period 3750.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Mrs Nancy Benninghoff <hr/> Mailing Address PO Box 2806 <hr/> City Rncho Cuca State CA Zip Code 91629 <hr/> Purpose of Disbursement Website Management Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4860 Date of Disbursement 09 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 850.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Mrs Nancy Benninghoff <hr/> Mailing Address PO Box 2806 <hr/> City Rncho Cuca State CA Zip Code 91629 <hr/> Purpose of Disbursement Web Management/Module Upgrades Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.4928 Date of Disbursement 11 / 16 / 2009 <hr/> Amount of Each Disbursement this Period 1999.12

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6599.12
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mrs Nancy Benninghoff</p> <p>Mailing Address PO Box 2806</p> <p>City Rncho Cuca State CA Zip Code 91629</p> <p>Purpose of Disbursement Web Management/software</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><b>Transaction ID:</b> SB21B.4985</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1661.15"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Blue Shield of California</p> <p>Mailing Address 50 Beale St</p> <p>City San Francisco State CA Zip Code 94105</p> <p>Purpose of Disbursement Medical Insurance</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><b>Transaction ID:</b> SB21B.4837</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1189.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Blue Shield of California</p> <p>Mailing Address 50 Beale St</p> <p>City San Francisco State CA Zip Code 94105</p> <p>Purpose of Disbursement Medical Insurance</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><b>Transaction ID:</b> SB21B.4986</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="594.50"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3444.65"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Darshan Brahmbhatt	Transaction ID: SB21B.4807 Date of Disbursement 07 / 24 / 2009
	Mailing Address 932 D Street	Amount of Each Disbursement this Period 190.00
	City Ramona State CA Zip Code 92065	
	Purpose of Disbursement Legal Research	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) Cagle Cartoons	Transaction ID: SB21B.4964 Date of Disbursement 12 / 04 / 2009
	Mailing Address PO Box 22342	Amount of Each Disbursement this Period 45.00
	City Santa Barbara State CA Zip Code 93121	
	Purpose of Disbursement Artwork/Columns	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) CalPeek	Transaction ID: SB21B.4987 Date of Disbursement 12 / 16 / 2009
	Mailing Address PO Box 4365	Amount of Each Disbursement this Period 50.00
	City Sacramento State CA Zip Code 95814	
	Purpose of Disbursement Directory	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	285.00
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Card Service International <hr/> Mailing Address PO Box 5180 <hr/> City Simi Valley State CA Zip Code 93062 <hr/> Purpose of Disbursement Credit Card Discount Fees Candidate Name <hr/> 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: SB21B.5014 Date of Disbursement 07 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 749.42
B.	Full Name (Last, First, Middle Initial) Card Service International <hr/> Mailing Address PO Box 5180 <hr/> City Simi Valley State CA Zip Code 93062 <hr/> Purpose of Disbursement Credit Card Discount Fees Candidate Name <hr/> 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: SB21B.5019 Date of Disbursement 08 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 809.85
C.	Full Name (Last, First, Middle Initial) Card Service International <hr/> Mailing Address PO Box 5180 <hr/> City Simi Valley State CA Zip Code 93062 <hr/> Purpose of Disbursement Credit Card Discount Fees Candidate Name <hr/> 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: SB21B.5028 Date of Disbursement 09 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 877.08

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2436.35
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b> Full Name (Last, First, Middle Initial) Card Service International Mailing Address PO Box 5180 City Simi Valley State CA Zip Code 93062 Purpose of Disbursement Credit Card Discount 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) ▼	Transaction ID: SB21B.4996 Date of Disbursement 10 / 31 / 2009
	Amount of Each Disbursement this Period 583.09

<b>B.</b> Full Name (Last, First, Middle Initial) Card Service International Mailing Address PO Box 5180 City Simi Valley State CA Zip Code 93062 Purpose of Disbursement Credit Card Discount 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) ▼	Transaction ID: SB21B.5004 Date of Disbursement 11 / 30 / 2009
	Amount of Each Disbursement this Period 617.70

<b>C.</b> Full Name (Last, First, Middle Initial) Card Service International Mailing Address PO Box 5180 City Simi Valley State CA Zip Code 93062 Purpose of Disbursement Credit Card Discount 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) ▼	Transaction ID: SB21B.5009 Date of Disbursement 12 / 31 / 2009
	Amount of Each Disbursement this Period 616.10

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1816.89
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Cinderella Cleaning Service	Transaction ID: SB21B.4868 Date of Disbursement
	Mailing Address c/o 932 D St	<input type="text" value="07"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ramona State CA Zip Code 92065	Amount of Each Disbursement this Period
	Purpose of Disbursement Cleaning Service	<input type="text" value="125.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Cinderella Cleaning Service	Transaction ID: SB21B.4827 Date of Disbursement
	Mailing Address c/o 932 D St	<input type="text" value="08"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ramona State CA Zip Code 92065	Amount of Each Disbursement this Period
	Purpose of Disbursement Cleaning Services/Office	<input type="text" value="100.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Cinderella Cleaning Service	Transaction ID: SB21B.4859 Date of Disbursement
	Mailing Address c/o 932 D St	<input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ramona State CA Zip Code 92065	Amount of Each Disbursement this Period
	Purpose of Disbursement Cleaning Service	<input type="text" value="100.00"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="325.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Cinderella Cleaning Service	Transaction ID: SB21B.4898 Date of Disbursement
	Mailing Address c/o 932 D St	<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ramona State CA Zip Code 92065	Amount of Each Disbursement this Period
	Purpose of Disbursement Cleaning Service	<input type="text" value="125.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Cinderella Cleaning Service	Transaction ID: SB21B.4942 Date of Disbursement
	Mailing Address c/o 932 D St	<input type="text" value="11"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ramona State CA Zip Code 92065	Amount of Each Disbursement this Period
	Purpose of Disbursement Cleaning Service	<input type="text" value="100.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Cinderella Cleaning Service	Transaction ID: SB21B.5323 Date of Disbursement
	Mailing Address c/o 932 D St	<input type="text" value="12"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Ramona State CA Zip Code 92065	Amount of Each Disbursement this Period
	Purpose of Disbursement Cleaning Service	<input type="text" value="100.00"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="325.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

<p><b>A.</b> Full Name (Last, First, Middle Initial) Claim Jumper</p> <p>Mailing Address 17th &amp; Tustin</p> <p>City Santa Ana State CA Zip Code 92705</p> <p>Purpose of Disbursement Meeting Expense</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><b>Transaction ID:</b> SB21B.4874</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="74.49"/></p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mary Deal</p> <p>Mailing Address 932 D Street</p> <p>City Ramona State CA Zip Code 92065</p> <p>Purpose of Disbursement Clerical</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><b>Transaction ID:</b> SB21B.4895</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="78.75"/></p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mary Deal</p> <p>Mailing Address 932 D Street</p> <p>City Ramona State CA Zip Code 92065</p> <p>Purpose of Disbursement Clerical</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><b>Transaction ID:</b> SB21B.4903</p> <p>Date of Disbursement</p> <p><input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="09"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="67.50"/></p> <p>Category/Type</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)

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Mary Deal	Transaction ID: SB21B.4976 Date of Disbursement 11 / 25 / 2009
	Mailing Address 932 D Street	Amount of Each Disbursement this Period 111.00
	City Ramona State CA Zip Code 92065	
	Purpose of Disbursement Clerical	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) Daniel Paul Díaz	Transaction ID: SB21B.4808 Date of Disbursement 07 / 15 / 2009
	Mailing Address 709 Garden Drive	Amount of Each Disbursement this Period 1500.00
	City Pompano Beach State FL Zip Code 34243	
	Purpose of Disbursement Administrative Services	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) Excellentia	Transaction ID: SB21B.4973 Date of Disbursement 12 / 18 / 2009
	Mailing Address PO Box 65450	Amount of Each Disbursement this Period 2000.00
	City Tacoma State WA Zip Code 98464	
	Purpose of Disbursement Writing Fee	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	3611.00
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address 18062 Yorba City Tustin State CA Zip Code 92780 Purpose of Disbursement Shipping 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: SB21B.4858 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 26.78
B.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address 18062 Yorba City Tustin State CA Zip Code 92780 Purpose of Disbursement Shipping 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: SB21B.4872 Date of Disbursement 09 / 08 / 2009 Amount of Each Disbursement this Period 26.78
C.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address 18062 Yorba City Tustin State CA Zip Code 92780 Purpose of Disbursement Shipping 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: SB21B.4875 Date of Disbursement 09 / 14 / 2009 Amount of Each Disbursement this Period 26.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	80.09
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address 18062 Yorba City Tustin State CA Zip Code 92780 Purpose of Disbursement Shipping 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: SB21B.4881 Date of Disbursement 09 / 25 / 2009 Amount of Each Disbursement this Period 26.53 Category/Type
B.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address 18062 Yorba City Tustin State CA Zip Code 92780 Purpose of Disbursement Shipping 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: SB21B.4917 Date of Disbursement 10 / 09 / 2009 Amount of Each Disbursement this Period 27.04 Category/Type
C.	Full Name (Last, First, Middle Initial) Federal Express Mailing Address 18062 Yorba City Tustin State CA Zip Code 92780 Purpose of Disbursement Shipping 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: SB21B.4924 Date of Disbursement 10 / 23 / 2009 Amount of Each Disbursement this Period 27.04 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	80.61
<b>TOTAL</b> 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 55 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.4925 Date of Disbursement
	Mailing Address 18062 Yorba	<input type="text" value="10"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="27.04"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.4946 Date of Disbursement
	Mailing Address 18062 Yorba	<input type="text" value="11"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="47.62"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.4947 Date of Disbursement
	Mailing Address 18062 Yorba	<input type="text" value="11"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="26.66"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="101.32"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.4949 Date of Disbursement
	Mailing Address 18062 Yorba	<input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="26.66"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.4961 Date of Disbursement
	Mailing Address 18062 Yorba	<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="26.66"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.4962 Date of Disbursement
	Mailing Address 18062 Yorba	<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping	<input type="text" value="26.66"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="79.98"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB21B.4965 Date of Disbursement																			
	Mailing Address 18062 Yorba	<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>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	0	9												
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Shipping Candidate Name	<table border="1"><tr><td>26.66</td></tr></table>	26.66																		
26.66																					
	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) Federal Express	Transaction ID: SB21B.4968 Date of Disbursement																			
	Mailing Address 18062 Yorba	<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>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	9												
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Shipping Candidate Name	<table border="1"><tr><td>27.29</td></tr></table>	27.29																		
27.29																					
	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) Federal Express	Transaction ID: SB21B.4969 Date of Disbursement																			
	Mailing Address 18062 Yorba	<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>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	9												
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Shipping Candidate Name	<table border="1"><tr><td>27.29</td></tr></table>	27.29																		
27.29																					
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>81.24</td></tr></table>	81.24
81.24		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4803 Date of Disbursement 07 / 03 / 2009
	Mailing Address 13421 Malena Dr	
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period 2200.00
	Purpose of Disbursement Medical reimbursement	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) Randy Goodwin	Transaction ID: SB21B.4804 Date of Disbursement 07 / 17 / 2009
	Mailing Address 13421 Malena Dr	
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Accounting Services	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) Randy Goodwin	Transaction ID: SB21B.4824 Date of Disbursement 08 / 03 / 2009
	Mailing Address 13421 Malena Dr	
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period 4000.00
	Purpose of Disbursement Accounting Services	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8700.00</b>
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4830 Date of Disbursement 08 / 18 / 2009
	Mailing Address 13421 Malena Dr	
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Management Services 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) ▼

B.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4832 Date of Disbursement 08 / 28 / 2009
	Mailing Address 13421 Malena Dr	
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Accounting Services 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) ▼

C.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4865 Date of Disbursement 09 / 21 / 2009
	Mailing Address 13421 Malena Dr	
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period 1100.00
	Purpose of Disbursement Medical Reimbursement 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4600.00
<b>TOTAL</b> 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 60 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4866 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="370.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4867 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="440.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4892 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting Services	<input type="text" value="3000.00"/>
	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) ..... ▶

**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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4900 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage Reimbursement	<input type="text" value="440.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4901 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Reimbursement	<input type="text" value="550.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4904 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="10"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Management Services	<input type="text" value="1000.00"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1990.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4893 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="10"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting Services	<input type="text" value="2500.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4939 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="11"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Reimbursement	<input type="text" value="1100.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4937 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="11"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Management Services	<input type="text" value="2000.00"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5600.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4931 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting Services	<input type="text" value="4000.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4932 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Management Services	<input type="text" value="1000.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Randy Goodwin	Transaction ID: SB21B.4979 Date of Disbursement
	Mailing Address 13421 Malena Dr	<input type="text" value="12"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Management Services	<input type="text" value="6000.00"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="11000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) GreeneLight Consulting	Transaction ID: SB21B.4989 Date of Disbursement
	Mailing Address 2431 Sahale Falls Ct	<input type="text" value="12"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City State Zip Code Braselton GA 30517	Amount of Each Disbursement this Period
	Purpose of Disbursement Creative Fee/Advertising	<input type="text" value="1000.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Healthplan Services	Transaction ID: SB21B.4805 Date of Disbursement
	Mailing Address 932 D St	<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City State Zip Code Ramona CA 92065	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Insurance	<input type="text" value="51.80"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Healthplan Services	Transaction ID: SB21B.4833 Date of Disbursement
	Mailing Address 932 D St	<input type="text" value="08"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City State Zip Code Ramona CA 92065	Amount of Each Disbursement this Period
	Purpose of Disbursement Medical Insurance	<input type="text" value="43.47"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1095.27"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b>	Full Name (Last, First, Middle Initial) Highbeam.com  Mailing Address 1122 Parkway Ave  City New York State NY Zip Code 10014  Purpose of Disbursement Research Service 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>Transaction ID:</b> SB21B.4818 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 0 9	Amount of Each Disbursement this Period  29.95
<b>B.</b>	Full Name (Last, First, Middle Initial) Highbeam.com  Mailing Address 1122 Parkway Ave  City New York State NY Zip Code 10014  Purpose of Disbursement Research 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>Transaction ID:</b> SB21B.4850 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 9	Amount of Each Disbursement this Period  29.95
<b>C.</b>	Full Name (Last, First, Middle Initial) Highbeam.com  Mailing Address 1122 Parkway Ave  City New York State NY Zip Code 10014  Purpose of Disbursement Research Service 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>Transaction ID:</b> SB21B.4873 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 9	Amount of Each Disbursement this Period  29.95

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>89.85</b>
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Highbeam.com</p> <p>Mailing Address 1122 Parkway Ave</p> <p>City New York State NY Zip Code 10014</p> <p>Purpose of Disbursement Research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4916</p> <p>Date of Disbursement 10 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 29.95</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Highbeam.com</p> <p>Mailing Address 1122 Parkway Ave</p> <p>City New York State NY Zip Code 10014</p> <p>Purpose of Disbursement Research Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4948</p> <p>Date of Disbursement 11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 29.95</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Highbeam.com</p> <p>Mailing Address 1122 Parkway Ave</p> <p>City New York State NY Zip Code 10014</p> <p>Purpose of Disbursement Research Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4966</p> <p>Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 29.95</p>

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

**89.85**

**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)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b>	Full Name (Last, First, Middle Initial) Robert Knight  Mailing Address 206 Markwood Dr  City Sterling State VA Zip Code 20165  Purpose of Disbursement Security Service 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: SB21B.4863 Date of Disbursement 09 / 04 / 2009  Amount of Each Disbursement this Period 8.66
<b>B.</b>	Full Name (Last, First, Middle Initial) Gary Kreep  Mailing Address 932 D Street  City Ramona State CA Zip Code 92065  Purpose of Disbursement Gas reimbursement for Florida meeting 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: SB21B.4796 Date of Disbursement 07 / 07 / 2009  Amount of Each Disbursement this Period 40.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Gary Kreep  Mailing Address 932 D Street  City Ramona State CA Zip Code 92065  Purpose of Disbursement Rent 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: SB21B.4812 Date of Disbursement 07 / 27 / 2009  Amount of Each Disbursement this Period 950.00

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

998.66

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Gary Kleep <hr/> Mailing Address 932 D Street <hr/> City Ramona State CA Zip Code 92065 <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> 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: SB21B.4799 Date of Disbursement 07 / 28 / 2009 <hr/> Amount of Each Disbursement this Period 4000.00
B.	Full Name (Last, First, Middle Initial) Gary Kleep <hr/> Mailing Address 932 D Street <hr/> City Ramona State CA Zip Code 92065 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> 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: SB21B.4822 Date of Disbursement 08 / 27 / 2009 <hr/> Amount of Each Disbursement this Period 950.00
C.	Full Name (Last, First, Middle Initial) Gary Kleep <hr/> Mailing Address 932 D Street <hr/> City Ramona State CA Zip Code 92065 <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> 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: SB21B.4823 Date of Disbursement 08 / 27 / 2009 <hr/> Amount of Each Disbursement this Period 2000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6950.00
<b>TOTAL</b> 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 69 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Gary Kleep	Transaction ID: SB21B.4890 Date of Disbursement 10 / 01 / 2009
	Mailing Address 932 D Street	Amount of Each Disbursement this Period 950.00
	City Ramona State CA Zip Code 92065	
	Purpose of Disbursement Rent	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) Gary Kleep	Transaction ID: SB21B.4891 Date of Disbursement 10 / 01 / 2009
	Mailing Address 932 D Street	Amount of Each Disbursement this Period 2000.00
	City Ramona State CA Zip Code 92065	
	Purpose of Disbursement Legal Services	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) Gary Kleep	Transaction ID: SB21B.4896 Date of Disbursement 10 / 28 / 2009
	Mailing Address 932 D Street	Amount of Each Disbursement this Period 950.00
	City Ramona State CA Zip Code 92065	
	Purpose of Disbursement Rent	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	3900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b>	Full Name (Last, First, Middle Initial) Gary Kleep Mailing Address 932 D Street City Ramona State CA Zip Code 92065 Purpose of Disbursement Legal 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) ▼	<b>Transaction ID:</b> SB21B.4897 <b>Date of Disbursement</b> 10 / 28 / 2009	Amount of Each Disbursement this Period 2000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Gary Kleep Mailing Address 932 D Street City Ramona State CA Zip Code 92065 Purpose of Disbursement Legal 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) ▼	<b>Transaction ID:</b> SB21B.4929 <b>Date of Disbursement</b> 11 / 16 / 2009	Amount of Each Disbursement this Period 2000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Gary Kleep Mailing Address 932 D Street City Ramona State CA Zip Code 92065 Purpose of Disbursement Rent 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>Transaction ID:</b> SB21B.4930 <b>Date of Disbursement</b> 11 / 16 / 2009	Amount of Each Disbursement this Period 950.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4950.00
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Gary Kleep	Transaction ID: SB21B.4975 Date of Disbursement 11 / 30 / 2009
	Mailing Address 932 D Street	Amount of Each Disbursement this Period 8000.00
	City Ramona State CA Zip Code 92065	
	Purpose of Disbursement Legal Services	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) Gary Kleep	Transaction ID: SB21B.4983 Date of Disbursement 12 / 18 / 2009
	Mailing Address 932 D Street	Amount of Each Disbursement this Period 950.00
	City Ramona State CA Zip Code 92065	
	Purpose of Disbursement Rent	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) Micro Center	Transaction ID: SB21B.4857 Date of Disbursement 08 / 24 / 2009
	Mailing Address 1100 Edinger	Amount of Each Disbursement this Period 141.36
	City Tustin State CA Zip Code 92780	
	Purpose of Disbursement Software	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	9091.36
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Micro Center	Transaction ID: SB21B.4922
	Mailing Address 1100 Edinger	Date of Disbursement 10 / 19 / 2009
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period 667.63
	Purpose of Disbursement Toner	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Micro Center	Transaction ID: SB21B.4953
	Mailing Address 1100 Edinger	Date of Disbursement 11 / 23 / 2009
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period 2360.98
	Purpose of Disbursement Computer printer/toner	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Morgan Meredith & Associates	Transaction ID: SB21B.4828
	Mailing Address 2875 Towerview Rd	Date of Disbursement 08 / 12 / 2009
	City Herndon State VA Zip Code 20171	Amount of Each Disbursement this Period 6021.32
	Purpose of Disbursement Postage for Mailing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	9049.93
<b>TOTAL</b> 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 73 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) New York Times</p> <p>Mailing Address 1 Times Square</p> <p>City New York State NY Zip Code 10020</p> <p>Purpose of Disbursement Research</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><b>Transaction ID:</b> SB21B.4914</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="97.89"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) New York Times</p> <p>Mailing Address 1 Times Square</p> <p>City New York State NY Zip Code 10020</p> <p>Purpose of Disbursement Research</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><b>Transaction ID:</b> SB21B.4972</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="97.89"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Political Advertising</p> <p>Mailing Address 1201 S Alma School Rd</p> <p>City Mesa State AZ Zip Code 85210</p> <p>Purpose of Disbursement Phone/Mail Communication</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><b>Transaction ID:</b> SB21B.5010</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10950.96"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="11146.74"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
REPUBLICAN MAJORITY CAMPAIGN

<p><b>A.</b> Full Name (Last, First, Middle Initial) Political Advertising</p> <p>Mailing Address 1201 S Alma School Rd</p> <p>City Mesa State AZ Zip Code 85210</p> <p>Purpose of Disbursement Phone/Mail Communication</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5011 <b>Date of Disbursement</b> 07 / 13 / 2009</p> <p><b>Amount of Each Disbursement this Period</b> 13634.47</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Political Advertising</p> <p>Mailing Address 1201 S Alma School Rd</p> <p>City Mesa State AZ Zip Code 85210</p> <p>Purpose of Disbursement Phone/mail communication</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5012 <b>Date of Disbursement</b> 07 / 21 / 2009</p> <p><b>Amount of Each Disbursement this Period</b> 31021.67</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Political Advertising</p> <p>Mailing Address 1201 S Alma School Rd</p> <p>City Mesa State AZ Zip Code 85210</p> <p>Purpose of Disbursement Phone/Mail Communication</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5013 <b>Date of Disbursement</b> 07 / 27 / 2009</p> <p><b>Amount of Each Disbursement this Period</b> 14427.52</p>

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

59083.66

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)  
REPUBLICAN MAJORITY CAMPAIGN

A. Political Advertising	Full Name (Last, First, Middle Initial)	Transaction ID: SB21B.5015																					
	Mailing Address 1201 S Alma School Rd	Date of Disbursement																					
	City Mesa State AZ Zip Code 85210	<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>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		0	3		2	0	0	9														
	Purpose of Disbursement Phone/Mail Communication	Amount of Each Disbursement this Period																					
	Candidate Name	48019.77																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:	Category/Type																					

B. Political Advertising	Full Name (Last, First, Middle Initial)	Transaction ID: SB21B.5016																					
	Mailing Address 1201 S Alma School Rd	Date of Disbursement																					
	City Mesa State AZ Zip Code 85210	<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>8</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	0		2	0	0	9														
	Purpose of Disbursement Phone/Mail Communication	Amount of Each Disbursement this Period																					
	Candidate Name	28596.90																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:	Category/Type																					

C. Political Advertising	Full Name (Last, First, Middle Initial)	Transaction ID: SB21B.5017																					
	Mailing Address 1201 S Alma School Rd	Date of Disbursement																					
	City Mesa State AZ Zip Code 85210	<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>8</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	7		2	0	0	9														
	Purpose of Disbursement Phone/Mail Communication	Amount of Each Disbursement this Period																					
	Candidate Name	35194.90																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
	State: District:	Category/Type																					

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	111811.57
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5018 Date of Disbursement
	Mailing Address 1201 S Alma School Rd	<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone/mail communication	<input type="text" value="23672.01"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5020 Date of Disbursement
	Mailing Address 1201 S Alma School Rd	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone/Mail Communication	<input type="text" value="31874.05"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5021 Date of Disbursement
	Mailing Address 1201 S Alma School Rd	<input type="text" value="09"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone/mail communication	<input type="text" value="27670.42"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="83216.48"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5023 Date of Disbursement																			
	Mailing Address 1201 S Alma School Rd	<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>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	4		2	0	0	9												
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Phone/Mail communication	<table border="1"><tr><td>31758.87</td></tr></table>	31758.87																		
31758.87																					
	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) ▼																			

B.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5024 Date of Disbursement																			
	Mailing Address 1201 S Alma School Rd	<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>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	1		2	0	0	9												
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Phone/Mail Communication	<table border="1"><tr><td>44219.67</td></tr></table>	44219.67																		
44219.67																					
	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) ▼																			

C.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5027 Date of Disbursement																			
	Mailing Address 1201 S Alma School Rd	<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>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	8		2	0	0	9												
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Phone/Mail Communication	<table border="1"><tr><td>44862.51</td></tr></table>	44862.51																		
44862.51																					
	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) ..... ► 

120841.05
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**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)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b> Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.4991 Date of Disbursement 10 / 05 / 2009
	Mailing Address 1201 S Alma School Rd City Mesa State AZ Zip Code 85210 Purpose of Disbursement Phone/Mail Communication Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Amount of Each Disbursement this Period 36988.88	

<b>B.</b> Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.4992 Date of Disbursement 10 / 12 / 2009
	Mailing Address 1201 S Alma School Rd City Mesa State AZ Zip Code 85210 Purpose of Disbursement Phone/Mail Communication Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Amount of Each Disbursement this Period 38866.46	

<b>C.</b> Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.4993 Date of Disbursement 10 / 19 / 2009
	Mailing Address 1201 S Alma School Rd City Mesa State AZ Zip Code 85210 Purpose of Disbursement Phone/Mail Communication Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Amount of Each Disbursement this Period 32490.97	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	108346.31
<b>TOTAL</b> 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 79 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.4994 Date of Disbursement
	Mailing Address 1201 S Alma School Rd	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone/Mail Communication	<input type="text" value="27493.88"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.4997 Date of Disbursement
	Mailing Address 1201 S Alma School Rd	<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone/Mail Communication	<input type="text" value="30832.32"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.4999 Date of Disbursement
	Mailing Address 1201 S Alma School Rd	<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone/Mail Communication	<input type="text" value="22282.73"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="80608.93"/>
<b>TOTAL</b> 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 80 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5000 Date of Disbursement
	Mailing Address 1201 S Alma School Rd	<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone/Mail Communication	<input type="text" value="28153.53"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5001 Date of Disbursement
	Mailing Address 1201 S Alma School Rd	<input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone/Mail Communication	<input type="text" value="26669.15"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5002 Date of Disbursement
	Mailing Address 1201 S Alma School Rd	<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period
	Purpose of Disbursement Phone/Mail Communication	<input type="text" value="17732.56"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="72555.24"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5005 Date of Disbursement																			
	Mailing Address 1201 S Alma School Rd	<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>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	0	9												
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Phone/Mail Communication	<table border="1"><tr><td>36386.30</td></tr></table>	36386.30																		
36386.30																					
	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) ▼																			

B.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5006 Date of Disbursement																			
	Mailing Address 1201 S Alma School Rd	<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>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	0	9												
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Phone/Mail Communication	<table border="1"><tr><td>18765.65</td></tr></table>	18765.65																		
18765.65																					
	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) ▼																			

C.	Full Name (Last, First, Middle Initial) Political Advertising	Transaction ID: SB21B.5007 Date of Disbursement																			
	Mailing Address 1201 S Alma School Rd	<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>1</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		2	1		2	0	0	9												
	City Mesa State AZ Zip Code 85210	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Phone/Mail Communication	<table border="1"><tr><td>40573.23</td></tr></table>	40573.23																		
40573.23																					
	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) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>95725.18</td></tr></table>	95725.18
95725.18		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

<p><b>A.</b> Full Name (Last, First, Middle Initial) Political Advertising</p> <p>Mailing Address 1201 S Alma School Rd</p> <p>City Mesa State AZ Zip Code 85210</p> <p>Purpose of Disbursement Phone/Mail Communication</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5008 <b>Date of Disbursement</b> 12 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 13574.76</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Postmaster</p> <p>Mailing Address 2202 Grand Ave</p> <p>City Santa Ana State CA Zip Code 92705</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4869 <b>Date of Disbursement</b> 09 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 146.40</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Postmaster</p> <p>Mailing Address 2202 Grand Ave</p> <p>City Santa Ana State CA Zip Code 92705</p> <p>Purpose of Disbursement Box Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.5276 <b>Date of Disbursement</b> 09 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 200.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	13921.16
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: SB21B.4913 Date of Disbursement
	Mailing Address 2202 Grand Ave	<input type="text" value="10"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Shipping/Postage	<input type="text" value="48.48"/>
	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 <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Postmaster	Transaction ID: SB21B.4918 Date of Disbursement
	Mailing Address 2202 Grand Ave	<input type="text" value="10"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92705	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	<input type="text" value="215.60"/>
	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 <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) RMLC	Transaction ID: SB21B.5278 Date of Disbursement
	Mailing Address 44084 Riverside Parkway	<input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Leesburg State VA Zip Code 20176	Amount of Each Disbursement this Period
	Purpose of Disbursement List Rental	<input type="text" value="5655.00"/>
	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 <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5919.08"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b>	Full Name (Last, First, Middle Initial) San Diego Gas & Electric  Mailing Address 456 Main  City San Diego State CA Zip Code 92117  Purpose of Disbursement Utilities for office 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>Transaction ID:</b> SB21B.4811 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 4 / 2 0 0 9	Amount of Each Disbursement this Period  60.86
<b>B.</b>	Full Name (Last, First, Middle Initial) San Diego Gas & Electric  Mailing Address 456 Main  City San Diego State CA Zip Code 92117  Purpose of Disbursement Utilities 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>Transaction ID:</b> SB21B.4836 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 9	Amount of Each Disbursement this Period  62.73
<b>C.</b>	Full Name (Last, First, Middle Initial) San Diego Gas & Electric  Mailing Address 456 Main  City San Diego State CA Zip Code 92117  Purpose of Disbursement Utilities 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>Transaction ID:</b> SB21B.4864 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 8 / 2 0 0 9	Amount of Each Disbursement this Period  74.32

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	197.91
<b>TOTAL</b> 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 85 / 100

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) San Diego Gas & Electric	Transaction ID: SB21B.4940 Date of Disbursement 10 / 28 / 2009
	Mailing Address 456 Main	Amount of Each Disbursement this Period 46.26
	City San Diego State CA Zip Code 92117	
	Purpose of Disbursement Utilities 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) ▼

B.	Full Name (Last, First, Middle Initial) San Diego Gas & Electric	Transaction ID: SB21B.4938 Date of Disbursement 11 / 16 / 2009
	Mailing Address 456 Main	Amount of Each Disbursement this Period 30.44
	City San Diego State CA Zip Code 92117	
	Purpose of Disbursement Utilities 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) ▼

C.	Full Name (Last, First, Middle Initial) San Diego Gas & Electric	Transaction ID: SB21B.4984 Date of Disbursement 12 / 18 / 2009
	Mailing Address 456 Main	Amount of Each Disbursement this Period 26.33
	City San Diego State CA Zip Code 92117	
	Purpose of Disbursement Utilities 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	103.03
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) James Sills</p> <p>Mailing Address c/o 932 D St</p> <p>City Ramona State CA Zip Code 92065</p> <p>Purpose of Disbursement Research Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4813</p> <p>Date of Disbursement 07 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 750.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) James Sills</p> <p>Mailing Address c/o 932 D St</p> <p>City Ramona State CA Zip Code 92065</p> <p>Purpose of Disbursement Research Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4825</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 750.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) James Sills</p> <p>Mailing Address c/o 932 D St</p> <p>City Ramona State CA Zip Code 92065</p> <p>Purpose of Disbursement Research Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4861</p> <p>Date of Disbursement 08 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 750.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2250.00</b>
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b>	Full Name (Last, First, Middle Initial) James Sills  Mailing Address c/o 932 D St  City Ramona State CA Zip Code 92065  Purpose of Disbursement Research 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: SB21B.4902 Date of Disbursement 10 / 05 / 2009  Amount of Each Disbursement this Period 750.00  Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) James Sills  Mailing Address c/o 932 D St  City Ramona State CA Zip Code 92065  Purpose of Disbursement Research Service 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: SB21B.4943 Date of Disbursement 11 / 03 / 2009  Amount of Each Disbursement this Period 750.00  Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) James Sills  Mailing Address c/o 932 D St  City Ramona State CA Zip Code 92065  Purpose of Disbursement Research 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: SB21B.4977 Date of Disbursement 11 / 30 / 2009  Amount of Each Disbursement this Period 750.00  Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2250.00
<b>TOTAL</b> 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)

<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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.4816 Date of Disbursement
	Mailing Address 2120 East 17th St	<input type="text" value="07"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92701	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies	<input type="text" value="16.19"/>
	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) Staples	Transaction ID: SB21B.4819 Date of Disbursement
	Mailing Address 2120 East 17th St	<input type="text" value="07"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92701	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies	<input type="text" value="156.19"/>
	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) Staples	Transaction ID: SB21B.4855 Date of Disbursement
	Mailing Address 2120 East 17th St	<input type="text" value="08"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92701	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies	<input type="text" value="197.80"/>
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="370.18"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.4919 Date of Disbursement
	Mailing Address 2120 East 17th St	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92701	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies	<input type="text" value="151.23"/>
	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) Staples	Transaction ID: SB21B.4920 Date of Disbursement
	Mailing Address 2120 East 17th St	<input type="text" value="10"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92701	Amount of Each Disbursement this Period
	Purpose of Disbursement Offices Supplies	<input type="text" value="79.18"/>
	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) Staples	Transaction ID: SB21B.4950 Date of Disbursement
	Mailing Address 2120 East 17th St	<input type="text" value="11"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Santa Ana State CA Zip Code 92701	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Supplies	<input type="text" value="34.79"/>
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="265.20"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.4951
	Mailing Address 2120 East 17th St	Date of Disbursement 11 / 23 / 2009
	City Santa Ana State CA Zip Code 92701	Amount of Each Disbursement this Period 36.96
	Purpose of Disbursement Office 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) ▼

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB21B.4967
	Mailing Address 2120 East 17th St	Date of Disbursement 12 / 08 / 2009
	City Santa Ana State CA Zip Code 92701	Amount of Each Disbursement this Period 138.15
	Purpose of Disbursement Offices 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) Union Co.	Transaction ID: SB21B.4921
	Mailing Address 17622 17th St	Date of Disbursement 10 / 19 / 2009
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period 57.11
	Purpose of Disbursement Meeting Expense	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>232.22</b>
<b>TOTAL</b> 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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) Union Co.	Transaction ID: SB21B.4952 Date of Disbursement
	Mailing Address 17622 17th St	<input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City Tustin State CA Zip Code 92780	Amount of Each Disbursement this Period
	Purpose of Disbursement Meeting Expense	<input type="text" value="53.02"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) United Printing and Mailing	Transaction ID: SB21B.5025 Date of Disbursement
	Mailing Address 4833 S 38th St	<input type="text" value="09"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85040	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing	<input type="text" value="1210.25"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) United Printing and Mailing	Transaction ID: SB21B.5026 Date of Disbursement
	Mailing Address 4833 S 38th St	<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City Phoenix State AZ Zip Code 85040	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing	<input type="text" value="1178.84"/>
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2442.11"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) United Printing and Mailing	Transaction ID: SB21B.4995 Date of Disbursement
	Mailing Address 4833 S 38th St	<input type="text" value="10"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Phoenix State AZ Zip Code 85040	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing	<input type="text" value="1759.88"/>
	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) United Printing and Mailing	Transaction ID: SB21B.4998 Date of Disbursement
	Mailing Address 4833 S 38th St	<input type="text" value="11"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Phoenix State AZ Zip Code 85040	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing	<input type="text" value="1178.85"/>
	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) United Printing and Mailing	Transaction ID: SB21B.5003 Date of Disbursement
	Mailing Address 4833 S 38th St	<input type="text" value="11"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Phoenix State AZ Zip Code 85040	Amount of Each Disbursement this Period
	Purpose of Disbursement Printing	<input type="text" value="2677.18"/>
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5615.91"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Mailing Address 272 E Via Rancho Parkway City Escondido State CA Zip Code 92025 Purpose of Disbursement Wireless Communication 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: SB21B.4810 Date of Disbursement 07 / 24 / 2009
	Amount of Each Disbursement this Period 131.19
<b>B.</b> Full Name (Last, First, Middle Initial) Western CPAC Mailing Address 30011 Ivy Glenn Dr City Laguna Niguel State CA Zip Code 92677 Purpose of Disbursement Table Rental 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: SB21B.4894 Date of Disbursement 10 / 21 / 2009
	Amount of Each Disbursement this Period 750.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

881.19

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

875193.40

**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)  
REPUBLICAN MAJORITY CAMPAIGN

A.	Full Name (Last, First, Middle Initial) DOUGLAS L. MR. HOFFMAN	Transaction ID: SB23.4909 Date of Disbursement 10 / 23 / 2009
	Mailing Address PO BOX 270 25 ADK LODGE ROAD	Amount of Each Disbursement this Period 1000.00
	City LAKE PLACID	State NY
	Zip Code 12946	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name DOUGLAS L. MR. HOFFMAN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General
	State: NY District: 23	
B.	Full Name (Last, First, Middle Initial) DOUGLAS L. MR. HOFFMAN	Transaction ID: SB23.4956 Date of Disbursement 10 / 30 / 2009
	Mailing Address PO BOX 270 25 ADK LODGE ROAD	Amount of Each Disbursement this Period 4000.00
	City LAKE PLACID	State NY
	Zip Code 12946	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NY District: 23	

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

5000.00

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

5000.00

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPUBLICAN MAJORITY CAMPAIGN	FEC IDENTIFICATION NUMBER <b>C</b> C00442319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

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Mailing Address  
709 Garden Drive

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City Pompano Beach	State FL	Zip Code 34243
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Purpose of Expenditure Consulting Fee	Category/ Type 001
--	--------------------------

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Name of Federal Candidate supported or Opposed by expenditure:  
MARCO RUBIO

---

Calendar Year-To-Date Per Election for Office Sought	1500.00
---	---------

Date  
M M / D D / Y Y Y Y  
07 / 30 / 2009

Amount  
1500.00

Transaction ID: SE.4840

Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

---

Mailing Address  
709 Garden Drive

---

City Pompano Beach	State FL	Zip Code 34243
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Purpose of Expenditure Consulting Fee	Category/ Type 001
--	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
MARCO RUBIO

---

Calendar Year-To-Date Per Election for Office Sought	3000.00
---	---------

Date  
M M / D D / Y Y Y Y  
08 / 18 / 2009

Amount  
1500.00

Transaction ID: SE.4842

Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	3000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Randy Goodwin  
Signature

Date M M / D D / Y Y Y Y  
04 / 15 / 2010

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPUBLICAN MAJORITY CAMPAIGN	FEC IDENTIFICATION NUMBER <b>C</b> C00442319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

Date  
M M / D D / Y Y Y Y  
0 8 / 1 8 / 2 0 0 9

Mailing Address  
709 Garden Drive

Amount  
95.01

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4843

Purpose of Expenditure  
Expenses

Category/  
Type 002

Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
MARCO RUBIO

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 3095.01

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

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

Mailing Address  
709 Garden Drive

Amount  
2050.67

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4887

Purpose of Expenditure  
Consulting Fee

Category/  
Type 001

Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
CHARLIE CRIST

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 5145.68

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	2145.68
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Randy Goodwin  
Signature

Date M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 0



# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPUBLICAN MAJORITY CAMPAIGN	FEC IDENTIFICATION NUMBER <b>C</b> C00442319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

Date  
MM / DD / YYYY  
09 / 21 / 2009

Mailing Address  
709 Garden Drive

Amount  
1500.00

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4883  
Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure Category/Type  
Consulting Fee 001

Name of Federal Candidate supported or Opposed by expenditure:  
CHARLIE CRIST

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
6645.68

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

Date  
MM / DD / YYYY  
09 / 21 / 2009

Mailing Address  
709 Garden Drive

Amount  
128.11

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4885  
Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure Category/Type  
Expenses 002

Name of Federal Candidate supported or Opposed by expenditure:  
CHARLIE CRIST

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
6773.79

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	1628.11
(b) SUBTOTAL of Unitemized Independent Expenditures .....	_____
(c) TOTAL Independent Expenditures .....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Randy Goodwin  
Signature

Date MM / DD / YYYY  
04 / 15 / 2010

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPUBLICAN MAJORITY CAMPAIGN	FEC IDENTIFICATION NUMBER <b>C</b> C00442319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

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

Mailing Address  
709 Garden Drive

Amount  
250.00

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4886

Purpose of Expenditure  
Expenses Category/Type 004

Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
MARCO RUBIO

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought 7023.79

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

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

Mailing Address  
709 Garden Drive

Amount  
1500.00

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4906

Purpose of Expenditure  
Category/Type 001

Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
MARCO RUBIO

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought 8523.79

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	1750.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

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Randy Goodwin  
Signature

Date M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 0

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPUBLICAN MAJORITY CAMPAIGN	FEC IDENTIFICATION NUMBER <b>C</b> C00442319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

Date  
M M / D D / Y Y Y Y  
1 1 / 0 3 / 2 0 0 9

Mailing Address  
709 Garden Drive

Amount  
1500.00

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4954

Purpose of Expenditure Category/Type  
Consulting Fee 001

Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
CHARLIE CRIST

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
10023.79

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

Date  
M M / D D / Y Y Y Y  
1 1 / 1 8 / 2 0 0 9

Mailing Address  
709 Garden Drive

Amount  
1500.00

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4955

Purpose of Expenditure Category/Type  
Consulting Fee 001

Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
MARCO RUBIO

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
11523.79

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	3000.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	

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Randy Goodwin  
Signature

Date M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 0

# SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) REPUBLICAN MAJORITY CAMPAIGN	FEC IDENTIFICATION NUMBER <b>C</b> C00442319
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

Date  
M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 9

Mailing Address  
709 Garden Drive

Amount  
1500.00

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4958  
Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure Category/Type  
Consulting Fee 001

Name of Federal Candidate supported or Opposed by expenditure:  
CHARLIE CRIST

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
13023.79

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Daniel Paul Diaz

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

Mailing Address  
709 Garden Drive

Amount  
1838.24

City State Zip Code  
Pompano Beach FL 34243

Transaction ID: SE.4957  
Office Sought:  House State: FL  
 Senate District: \_\_\_\_\_  
 Presidential

Purpose of Expenditure Category/Type  
Consulting Fee 001

Name of Federal Candidate supported or Opposed by expenditure:  
MARCO RUBIO

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
14862.03

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	3338.24
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures .....	14862.03

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Randy Goodwin  
Signature

Date M M / D D / Y Y Y Y  
0 4 / 1 5 / 2 0 1 0