

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Battle Born PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		109914.24
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	105600.25									
(c) Total Receipts (from Line 19)	37501.00	526271.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	143101.25	636185.40								
7. Total Disbursements (from Line 31)	29226.60	522310.75								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	113874.65	113874.65								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Battle Born PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5000.00	90380.00
(i) Itemized (use Schedule A)	1.00	60401.02
(ii) Unitemized	5001.00	150781.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	32500.00	335100.00
(c) Other Political Committees (such as PACs)	37501.00	485881.02
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	34193.65
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	1196.49
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
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))	37501.00	526271.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	37501.00	526271.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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.....	27559.94	256294.09
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	27559.94	256294.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	262500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	1666.66	1666.66
(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))	1666.66	1666.66
29. Other Disbursements.....	0.00	1850.00
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))..	29226.60	522310.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	29226.60	522310.75

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	37501.00	485881.02
34. Total Contribution Refunds (from Line 28(d))	1666.66	1666.66
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35834.34	484214.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	27559.94	256294.09
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1196.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	27559.94	255097.60

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 18	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) MR. G. OGDEN NUTTING		Date of Receipt																					
	Mailing Address 514 G. STREET SE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	2		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		0	2		2	0	0	8														
	City State Zip Code WASHINGTON DC 20003		Transaction ID: SA11.2920																					
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00																						
Name of Employer OGDEN NEWSPAPERS		Occupation PUBLISHER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00																						

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	5000.00

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

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

FOR LINE NUMBER: PAGE 7 / 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A. Full Name (Last, First, Middle Initial)
AMERICA'S HEALTH INSURANCE PLANS PAC

Mailing Address 601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 500

City WASHINGTON State DC Zip Code 20004-2601

FEC ID number of contributing federal political committee. **C** C00106740

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 12 / 11 / 2008
Transaction ID: SA11.2937
 Amount of Each Receipt this Period: 2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC

Mailing Address 1120 CONNECTICUT AVENUE, NW

City WASHINGTON State DC Zip Code 20036-3905

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 11 / 2008
Transaction ID: SA11.2933
 Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FEDERAL EXPRESS POLITICAL ACTION COMMITTEE

Mailing Address 942 SOUTH SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 12 / 11 / 2008
Transaction ID: SA11.2936
 Amount of Each Receipt this Period: 5000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 12000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial)
HSBC NORTH AMERICA PAC 'H-PAC'

Mailing Address 2700 SANDERS ROAD

City State Zip Code
PROSPECT HEIGHTS IL 60070-2701

FEC ID number of contributing federal political committee. C C00033423

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY
12 / 11 / 2008

Transaction ID: SA11.2935

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MEDCO HEALTH PAC

Mailing Address 591 REDWOOD HIGHWAY
BUILDING 4000

City State Zip Code
MILL VALLEY CA 94941-3039

FEC ID number of contributing federal political committee. C C00384362

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY
12 / 11 / 2008

Transaction ID: SA11.2934

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY PAC

Mailing Address 51 MADISON AVE., RM. 1109

City State Zip Code
NEW YORK NY 10010

FEC ID number of contributing federal political committee. C C00158881

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt MM / DD / YYYY
12 / 29 / 2008

Transaction ID: SA11.2942

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	12000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 9 / 18

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial)
PACIFIC LIFE INSURANCE CO. PAC

Mailing Address 700 NEWPORT CENTER DRIVE

City State Zip Code
NEWPORT BEACH CA 92660-6307

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

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

Transaction ID: SA11.2941

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
TARGETCITIZENS POLITICAL FORUM PAC

Mailing Address 100 NICOLLET MALL
TPS-3275

City State Zip Code
MINNEAPOLIS MN 55403

FEC ID number of contributing federal political committee. **C** C00098061

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: SA11.2940

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
VARIAN MEDICAL SYSTEMS PAC

Mailing Address 1212 S. VICTORY BL.

City State Zip Code
BURBANK CA 91502

FEC ID number of contributing federal political committee. **C** C00450965

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: SA11.2938

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

8500.00

TOTAL This Period (last page this line number only)

32500.00

**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)
Battle Born PAC

A. Full Name (Last, First, Middle Initial) AT & T MOBILITY Mailing Address PO BOX 6463 City CAROL STREAM State IL Zip Code 60197 Purpose of Disbursement PAC CELL PHONE 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: SB.1 Date of Disbursement 12 / 15 / 2008
	Amount of Each Disbursement this Period 118.85

B. Full Name (Last, First, Middle Initial) CHASE CARD SERVICE Mailing Address PO BOX 94014 City PALATINE State IL Zip Code 60094 Purpose of Disbursement NO VENDOR ITEMIZATION REQUIRED 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: SB.2 Date of Disbursement 12 / 15 / 2008
	Amount of Each Disbursement this Period 44.35

C. Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 LEESBURG PIKE City FALLS CHURCH State VA Zip Code 22043 Purpose of Disbursement PAC RECEIPTS PROCESSING 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: SB.3 Date of Disbursement 11 / 25 / 2008
	Amount of Each Disbursement this Period 475.00

SUBTOTAL of Disbursements This Page (optional) ▶	638.20
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) DOT THE I DESIGN & GRAPHICS	Transaction ID: SB.4
	Mailing Address 2814 GLENDALE RD.	Date of Disbursement MM / DD / YYYY 12 / 17 / 2008
	City CHARLOTTE State NC Zip Code 28209	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement PAC PRINTING	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) ERIN CASEY	Transaction ID: SB.5
	Mailing Address 425 2ND ST., NE	Date of Disbursement MM / DD / YYYY 11 / 30 / 2008
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 1143.62
	Purpose of Disbursement PAC SALARY	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) ERIN CASEY	Transaction ID: SB.6
	Mailing Address 425 2ND ST., NE	Date of Disbursement MM / DD / YYYY 12 / 15 / 2008
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 1143.62
	Purpose of Disbursement PAC SALARY	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:	

SUBTOTAL of Disbursements This Page (optional)	▶	2387.24
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) ERIN CASEY	Transaction ID: SB.7 Date of Disbursement 12 / 31 / 2008
	Mailing Address 425 2ND ST., NE	Amount of Each Disbursement this Period 8359.16
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement PAC SALARY 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) INTEGRAM EXPEDITED COMMUNICATIONS	Transaction ID: SB.9 Date of Disbursement 12 / 17 / 2008
	Mailing Address 8421 HILLTOP RD.	Amount of Each Disbursement this Period 5321.57
	City FAIRFAX State VA Zip Code 22041	
	Purpose of Disbursement PAC DIRECT MAIL 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) JESSICA WELTER	Transaction ID: SB.10 Date of Disbursement 11 / 30 / 2008
	Mailing Address 425 2ND ST., NE	Amount of Each Disbursement this Period 229.14
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement PAC SALARY 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) ►

13909.87

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) JESSICA WELTER	Transaction ID: SB.11 Date of Disbursement
	Mailing Address 425 2ND ST., NE	<input type="text" value="12"/> <input type="text" value="15"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC SALARY	<input type="text" value="458.28"/>
	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) JESSICA WELTER	Transaction ID: SB.12 Date of Disbursement
	Mailing Address 425 2ND ST., NE	<input type="text" value="12"/> <input type="text" value="31"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC SALARY	<input type="text" value="229.14"/>
	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) PAYCHEX	Transaction ID: SB.13 Date of Disbursement
	Mailing Address 3060 WILLIAMS DR., STE. 200	<input type="text" value="11"/> <input type="text" value="30"/> / <input type="text" value="2008"/>
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC PAYROLL TAXES	<input type="text" value="558.20"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1245.62"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) PAYCHEX	Transaction ID: SB.14 Date of Disbursement																			
	Mailing Address 3060 WILLIAMS DR., STE. 200	<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>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	0	/	2	0	0	8												
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC PAYROLL SERVICE	<table border="1"><tr><td>161.35</td></tr></table>	161.35																		
161.35																					
	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) PAYCHEX	Transaction ID: SB.15 Date of Disbursement																			
	Mailing Address 3060 WILLIAMS DR., STE. 200	<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>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	5	/	2	0	0	8												
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC PAYROLL TAXES	<table border="1"><tr><td>558.20</td></tr></table>	558.20																		
558.20																					
	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) PAYCHEX	Transaction ID: SB.16 Date of Disbursement																			
	Mailing Address 3060 WILLIAMS DR., STE. 200	<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>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	1	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	3	1	/	2	0	0	8												
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC PAYROLL TAXES	<table border="1"><tr><td>7875.41</td></tr></table>	7875.41																		
7875.41																					
	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)	<table border="1"><tr><td>8594.96</td></tr></table>	8594.96
8594.96		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

<p>A. Full Name (Last, First, Middle Initial) RON STESLOW</p> <p>Mailing Address 425 2ND ST., NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAC SALARY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.17</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="183.97"/></p>
<p>B. Full Name (Last, First, Middle Initial) RON STESLOW</p> <p>Mailing Address 425 2ND ST., NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAC SALARY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.18</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="183.97"/></p>
<p>C. Full Name (Last, First, Middle Initial) RON STESLOW</p> <p>Mailing Address 425 2ND ST., NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAC SALARY</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB.19</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="183.97"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="551.91"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) US POSTMASTER	Transaction ID: SB.20 Date of Disbursement
	Mailing Address GENERAL DELIVERY	<input type="text" value="12"/> <input type="text" value="17"/> / <input type="text" value="2008"/>
	City FALLS CHURCH State VA Zip Code 22043	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC POSTAGE	<input type="text" value="112.00"/>
	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) VERIZON WIRELESS	Transaction ID: SB.21 Date of Disbursement
	Mailing Address PO BOX 25505	<input type="text" value="11"/> <input type="text" value="25"/> / <input type="text" value="2008"/>
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC CELL PHONE	<input type="text" value="60.07"/>
	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) VERIZON WIRELESS	Transaction ID: SB.22 Date of Disbursement
	Mailing Address PO BOX 25505	<input type="text" value="12"/> <input type="text" value="15"/> / <input type="text" value="2008"/>
	City LEHIGH VALLEY State PA Zip Code 18002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC CELL PHONE	<input type="text" value="60.07"/>
	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)	<input type="text" value="232.14"/>
TOTAL This Period (last page this line number only)	<input type="text" value="27559.94"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial)
DAVID VITTER FOR SENATE

Transaction ID: SB.23

Date of Disbursement

Mailing Address PO BOX 8175

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

City State Zip Code
METAIRIE LA 70011

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

Category/
Type

Candidate Name
DAVID VITTER

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: LA District: 00

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF JASON CHAFFETZ

Transaction ID: SB.230

Date of Disbursement

Mailing Address 175 SW TEMPLE, STE. 650

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	8

City State Zip Code
SALT LAKE CITY UT 84101

Amount of Each Disbursement this Period

-5000.00

Purpose of Disbursement
Void check issued 9/30/08

011
Category/
Type

Candidate Name
Jason Chaffetz

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼
State: UT District: 08

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

0.00

**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)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.

Full Name (Last, First, Middle Initial)
GREG PAULK

Mailing Address 412 E. GOWAN RD.

City N. LAS VEGAS State NV Zip Code 89032

Purpose of Disbursement
CONTRIBUTION REFUND

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB.8

Date of Disbursement

12 / 15 / 2008

Amount of Each Disbursement this Period

1666.66

SUBTOTAL of Disbursements This Page (optional) ▶

1666.66

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

1666.66