

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) P.O. Box 370386 Las Vegas NV 89137 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00364596 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special Election on 11 04 2008 in the State of NV

5. Covering Period 10 01 2008 through 10 15 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Lisa Lisker Signature of Treasurer Electronically Filed by Lisa Lisker Date 10 23 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office Use Only FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Battle Born PAC

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

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	103704.16									
(c) Total Receipts (from Line 19)	25440.00	453446.52								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	129144.16	563360.76								
7. Total Disbursements (from Line 31)	6991.36	441207.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	122152.80	122152.80								
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	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

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	6530.00	77630.00
(i) Itemized (use Schedule A)	7518.00	58543.02
(ii) Unitemized	14048.00	136173.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	8000.00	277100.00
(c) Other Political Committees (such as PACs)	22048.00	413273.02
(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	3392.00	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	979.85
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))	25440.00	453446.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25440.00	453446.52

DETAILED SUMMARY PAGE

of Disbursements

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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.....	6991.36	206857.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	6991.36	206857.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	232500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	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))..	6991.36	441207.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6991.36	441207.96

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)	22048.00	413273.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	22048.00	413273.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6991.36	206857.96
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	979.85
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6991.36	205878.11

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 15
(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

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. GEORGE BERRY, III

Mailing Address 4N160 BURR ROAD

City SAINT CHARLES State IL Zip Code 60175

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 10 / 2008
Transaction ID: SA11.2789
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MR. JOHN F. GARABEDIAN

Mailing Address 42750 METCALF GAP ROAD

City AHWAHNEE State CA Zip Code 93601

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

Name of Employer E. G. FARMS Occupation RANCHER/INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 06 / 2008
Transaction ID: SA11.2720
 Amount of Each Receipt this Period: 150.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MR. JOSEPH A. REINKEMEYER

Mailing Address 1281 SKYLINE BLVD.

City RENO State NV Zip Code 89509

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 10 / 07 / 2008
Transaction ID: SA11.2672
 Amount of Each Receipt this Period: 30.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **430.00**

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 7 / 15
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) LINDA RICHARDSON		Date of Receipt
	Mailing Address 95 SPANISH GATE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2008
	City	State	Zip Code
	LAS VEGAS	NV	89113
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.2897
Name of Employer HOMEMAKER		Occupation HOMEMAKER	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"/> 5000.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) MRS. ELIZABETH J. SCHAFER		Date of Receipt
	Mailing Address 610 1ST STREET		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 06 / 2008
	City	State	Zip Code
	CORONADO	CA	92118
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.2751
Name of Employer HOMEMAKER		Occupation HOMEMAKER	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"/> 500.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) MR. PETER A. SCULLY		Date of Receipt
	Mailing Address 2640 WHITE PINE DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 07 / 2008
	City	State	Zip Code
	HENDERSON	NV	89074
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.2654
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	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"/> 500.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 6000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 15	
	(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

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NAME OF COMMITTEE (In Full) Battle Born PAC
--

A.	Full Name (Last, First, Middle Initial) MR. ROBERT SUNDERLAND	Date of Receipt
	Mailing Address 953 PYRITE AVENUE	<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2008"/>
	City State Zip Code HENDERON NV 89011	Transaction ID: SA11.2727
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
	Name of Employer Occupation RETIRED RETIRED	CONTRIBUTION
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="100.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="6530.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 15
	<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) ABBOT LABORATORIES PAC	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 100 ABBOTT PARK RD.	Transaction ID: SA11.2896
	City State Zip Code ABBOT PARK IL 60064	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) AMERICAN HOTEL & LODGING ASSOC HOTELPAC	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 1201 NEW YORK AVE., NW STE. 600	Transaction ID: SA11.2898
	City State Zip Code WASHINGTON DC 20005	Amount of Each Receipt this Period 3000.00
	FEC ID number of contributing federal political committee. C C00001198	CONTRIBUTION
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

C.	Full Name (Last, First, Middle Initial) PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I	Date of Receipt MM / DD / YYYY 10 / 08 / 2008
	Mailing Address 1301 K STREET NW SUITE 800W	Transaction ID: SA11.2894
	City State Zip Code WASHINGTON DC 20005	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C C00107235	CONTRIBUTION
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	8000.00
TOTAL This Period (last page this line number only)	8000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 15
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) Mr. George Mehocic	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 420 St. Andrews Rd	Transaction ID: SA12.28992
	City State Zip Code LAS VEGAS NV 89144	Amount of Each Receipt this Period 1666.00
	FEC ID number of contributing federal political committee. C	Transfer Memo
	Name of Employer Occupation Castle Properties Developer	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

B.	Full Name (Last, First, Middle Initial) Mr. Greg Paulk	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 412 E. Gowan Rd.	Transaction ID: SA12.28991
	City State Zip Code LAS VEGAS NV 89032	Amount of Each Receipt this Period 1666.00
	FEC ID number of contributing federal political committee. C	Transfer Memo
	Name of Employer Occupation New Com Inc. President	[MEMO ITEM]
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

C.	Full Name (Last, First, Middle Initial) SENATE MAJORITY COMMITTEE 2008	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 228 S. WASHINGTON ST., STE. 115	Transaction ID: SA12.2899
	City State Zip Code ALEXANDRIA VA 22314	Amount of Each Receipt this Period 3392.00
	FEC ID number of contributing federal political committee. C	Distribution of Net Proceeds
	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30361.00	

SUBTOTAL of Receipts This Page (optional)	3392.00
TOTAL This Period (last page this line number only)	3392.00

**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 10 / 09 / 2008
	Amount of Each Disbursement this Period 124.38

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 SEE MEMO ENTRIES 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 10 / 09 / 2008
	Amount of Each Disbursement this Period 4385.45

C. Full Name (Last, First, Middle Initial) Hachette Book Group Mailing Address 3 Center Plaza City Boston State MA Zip Code 02108 Purpose of Disbursement PAC Office Supplies 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.201 Date of Disbursement 10 / 09 / 2008
	Amount of Each Disbursement this Period 562.28 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	4509.83
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) La Lomita Dos	Transaction ID: SB.202 Date of Disbursement 10 / 09 / 2008
	Mailing Address 1330 Pennsylvania Ave., SE	Amount of Each Disbursement this Period 59.35
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement PAC Meeting/Meals	[MEMO ITEM]
	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) Oceannaire	Transaction ID: SB.204 Date of Disbursement 10 / 09 / 2008
	Mailing Address 1201 F St., NW	Amount of Each Disbursement this Period 462.48
	City WASHINGTON State DC Zip Code 20004	
	Purpose of Disbursement PAC Event Catering	[MEMO ITEM]
	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) W. Hotel	Transaction ID: SB.203 Date of Disbursement 10 / 09 / 2008
	Mailing Address 821 Marquette Ave.	Amount of Each Disbursement this Period 3119.86
	City Minneapolis State MN Zip Code 55402	
	Purpose of Disbursement PAC Lodging	[MEMO ITEM]
	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)	0.00
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 13 / 15

<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.3
	Mailing Address 425 2ND ST., NE	Date of Disbursement 10 / 02 / 2008
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 42.00
	Purpose of Disbursement PAC POSTAGE	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.4
	Mailing Address 425 2ND ST., NE	Date of Disbursement 10 / 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:	

C.	Full Name (Last, First, Middle Initial) JESSICA WELTER	Transaction ID: SB.5
	Mailing Address 425 2ND ST., NE	Date of Disbursement 10 / 15 / 2008
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 229.14
	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)	▶	1414.76
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 14 / 15

<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 Mailing Address 3060 WILLIAMS DR., STE. 200 City FAIRFAX State VA Zip Code 22031 Purpose of Disbursement PAC PAYROLL 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: SB.6 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 161.35

B. Full Name (Last, First, Middle Initial) PAYCHEX Mailing Address 3060 WILLIAMS DR., STE. 200 City FAIRFAX State VA Zip Code 22031 Purpose of Disbursement PAC PAYROLL TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB.7 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 558.20

C. Full Name (Last, First, Middle Initial) RON STESLOW Mailing Address 425 2ND ST., NE City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement PAC SALARY 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.8 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 183.97

SUBTOTAL of Disbursements This Page (optional) ▶	903.52
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 15

<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.</p> <p>Full Name (Last, First, Middle Initial) VERIZON WIRELESS</p> <p>Mailing Address PO BOX 25505</p> <p>City LEHIGH VALLEY State PA Zip Code 18002</p> <p>Purpose of Disbursement PAC CELL PHONE</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>Transaction ID: SB.9</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="9"/> / <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 style="text-align: center;"><input type="text" value="150.50"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) WACHOVIA</p> <p>Mailing Address 7901 WISCONSIN AVE.</p> <p>City BETHESDA State MD Zip Code 20814</p> <p>Purpose of Disbursement BANK CHARGES</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>Transaction ID: SB.10</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="9"/> / <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 style="text-align: center;"><input type="text" value="12.75"/></p>

SUBTOTAL of Disbursements This Page (optional) ►

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