

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, Runoff (d) 30-Day Post -Election Report for the: General, Runoff, Special Election on 11 04 2008 in the State of

5. Covering Period 10 16 2008 through 11 24 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 12 04 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**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Battle Born PAC

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

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	122152.80									
(c) Total Receipts (from Line 19)	35323.64	488770.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	157476.44	598684.40								
7. Total Disbursements (from Line 31)	51876.19	493084.15								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	105600.25	105600.25								
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
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

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	7750.00	85380.00
(i) Itemized (use Schedule A)	1857.00	60400.02
(ii) Unitemized	9607.00	145780.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	25500.00	302600.00
(c) Other Political Committees (such as PACs)	35107.00	448380.02
(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)	216.64	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))	35323.64	488770.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35323.64	488770.16

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	21876.19	228734.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	21876.19	228734.15
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30000.00	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	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))..	51876.19	493084.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	51876.19	493084.15

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	35107.00	448380.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35107.00	448380.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	21876.19	228734.15
37. Offsets to Operating Expenditures (from Line 15, page 3)	216.64	1196.49
38. Net Operating Expenditures (subtract Line 37 from Line 36)	21659.55	227537.66

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 19
	<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. DONALD E. AUSTIN	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 819 COUNTY ROAD 28	Transaction ID: SA11.2913
	City State Zip Code SOUTH NEW BERLINE NY 13843	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2015.00	

B.	Full Name (Last, First, Middle Initial) MR. CLINT D. CARLSON	Date of Receipt MM / DD / YYYY 10 / 30 / 2008
	Mailing Address 3658 STRATFORD AVE.	Transaction ID: SA11.2922
	City State Zip Code DALLAS TX 75205	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation CARLSON CAPITAL PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) MR. LAWRENCE G. DOULL, II	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 2766 WESTWIND ROAD	Transaction ID: SA11.2874
	City State Zip Code LAS VEGAS NV 89146	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 19
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) MR. RAY P. ODEN, JR.		Date of Receipt
	Mailing Address 702 THORA BLVD.		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	SHREVEPORT	LA	71106
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.2900 Amount of Each Receipt this Period <input type="text" value="500.00"/> CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1000.00"/>	

B.	Full Name (Last, First, Middle Initial) MR. MICHAEL A. PUCKER		Date of Receipt
	Mailing Address 71 S. WACKER DR., STE. 4600		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	CHICAGO	IL	60606
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer LATHAM & WATKINS		Occupation ATTORNEY	Transaction ID: SA11.2930 Amount of Each Receipt this Period <input type="text" value="5000.00"/> CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="7750.00"/>

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

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

FOR LINE NUMBER: PAGE 8 / 19
(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)
INTUIT 21ST CENTURY LEADERSHIP FUND
Mailing Address 2700 COAST AVE.
City State Zip Code
MOUNTAIN VIEW CA 94043
FEC ID number of contributing federal political committee. **C** C00361741
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00
Date of Receipt: M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 8
Transaction ID: SA11.2921
Amount of Each Receipt this Period
2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MCGUIREWOODS FEDERAL PAC FUND
Mailing Address 901 EAST CARY STREET
City State Zip Code
RICHMOND VA 23219
FEC ID number of contributing federal political committee. **C** C00225342
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4000.00
Date of Receipt: M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8
Transaction ID: SA11.2927
Amount of Each Receipt this Period
2000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOC. PAC
Mailing Address 1919 PENNSYLVANIA AVE., NW
City State Zip Code
WASHINGTON DC 20006
FEC ID number of contributing federal political committee. **C** C00004812
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt: M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8
Transaction ID: SA11.2928
Amount of Each Receipt this Period
5000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 9000.00
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 / 19
(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)
PROPERTY CASUALTY INSURERS ASSOC. PAC-PCIPAC
Mailing Address 2600 S. RIVER RD.
City DES PLAINES State IL Zip Code 60018
FEC ID number of contributing federal political committee. **C** C00066472
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000.00
Date of Receipt 10 / 30 / 2008
Transaction ID: SA11.2923
Amount of Each Receipt this Period 2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
REAL ESTATE INVESTMENT TRUST PAC
Mailing Address 1875 I ST., NW STE. 600
City WASHINGTON State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00182022
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 10 / 30 / 2008
Transaction ID: SA11.2926
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SMITHKLINE BEECHAM CORPORATION PAC
Mailing Address FIVE MOORE DRIVE
City RES. TRIANGLE PARK State NC Zip Code 27709
FEC ID number of contributing federal political committee. **C** C00199703
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 10 / 31 / 2008
Transaction ID: SA11.2929
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 10 / 19
	(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) UPSPAC		Date of Receipt
	Mailing Address 55 GLENLAKE PKWY, NE		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	ATLANTA	GA	30328
	FEC ID number of contributing federal political committee.		<input type="text" value="C00064766"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	Transaction ID: SA11.2925 Amount of Each Receipt this Period <input type="text" value="2500.00"/> CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) US CUBA DEMOCRACY PAC		Date of Receipt
	Mailing Address 1200 W. 49TH STREET		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	HIALEAH	FL	33012
	FEC ID number of contributing federal political committee.		<input type="text" value="C00387720"/>
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	Transaction ID: SA11.2924 Amount of Each Receipt this Period <input type="text" value="2000.00"/> CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="4500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="25500.00"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 19	
	(check only one)			
<input 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 checked="" 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)
Jessica Welter

Mailing Address 425 2nd St., NE

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	7	/	2	0	0	8

Transaction ID: SA15.01

Amount of Each Receipt this Period
216.64

Payroll Refund

SUBTOTAL of Receipts This Page (optional)	▶	216.64
TOTAL This Period (last page this line number only)	▶	216.64

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: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB.1
Date of Disbursement
11 / 20 / 2008

Amount of Each Disbursement this Period
118.85

B. Full Name (Last, First, Middle Initial)
BELTWAY CATERING LLC

Mailing Address 6330 DUNMAN WAY

City ALEXANDRIA State VA Zip Code 22315

Purpose of Disbursement PAC EVENT CATERING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB.2
Date of Disbursement
10 / 27 / 2008

Amount of Each Disbursement this Period
1017.50

C. 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 ITEM REQUIRED

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: SB.4
Date of Disbursement
11 / 06 / 2008

Amount of Each Disbursement this Period
101.68

SUBTOTAL of Disbursements This Page (optional) ▶

1238.03

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)
CHASE CARD SERVICE

Transaction ID: SB.5
Date of Disbursement

Mailing Address PO BOX 94014

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

City PALATINE State IL Zip Code 60094

Amount of Each Disbursement this Period

Purpose of Disbursement
SEE MEMO

101.68

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
FEDEX

Transaction ID: SB.51
Date of Disbursement

Mailing Address PO BOX 1935

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

City PROVO State UT Zip Code 84603

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC SHIPPING

86.61

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
CMDI

Transaction ID: SB.6
Date of Disbursement

Mailing Address 7704 LEESBURG PIKE

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

City FALLS CHURCH State VA Zip Code 22043

Amount of Each Disbursement this Period

Purpose of Disbursement
PAC RECEIPTS PROCESSING

1895.17

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1996.85

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

<p>A. Full Name (Last, First, Middle Initial) ERIN CASEY</p> <p>Mailing Address 425 2ND ST., NE</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement PAC POSTAGE</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.10</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <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="168.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) ERIN CASEY</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.8</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <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="1143.62"/></p>
<p>C. Full Name (Last, First, Middle Initial) ERIN CASEY</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.9</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <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="1143.62"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2455.24"/>
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) HUCKABY DAVIS LISKER INC.	Transaction ID: SB.11 Date of Disbursement 11 / 11 / 2008	
	Mailing Address 228 S. WASHINGTON ST., STE. 115		
	City ALEXANDRIA State VA Zip Code 22314 Purpose of Disbursement ACCOUNTING/COMPLIANCE SERVICES Candidate Name	Amount of Each Disbursement this Period 570.68	
	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) JESSICA WELTER	Transaction ID: SB.12 Date of Disbursement 10 / 31 / 2008	
	Mailing Address 425 2ND ST., NE		
	City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement SALARY Candidate Name	Amount of Each Disbursement this Period 229.14	
	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.13 Date of Disbursement 11 / 15 / 2008	
	Mailing Address 425 2ND ST., NE		
	City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement SALARY Candidate Name	Amount of Each Disbursement this Period 229.14	
	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)	1028.96
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 16 / 19

<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 10 / 31 / 2008
	Mailing Address 3060 WILLIAMS DR., STE. 200	Amount of Each Disbursement this Period 558.20
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAYROLL TAXES	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) PAYCHEX	Transaction ID: SB.15 Date of Disbursement 10 / 31 / 2008
	Mailing Address 3060 WILLIAMS DR., STE. 200	Amount of Each Disbursement this Period 5.40
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAYROLL TAXES	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) PAYCHEX	Transaction ID: SB.16 Date of Disbursement 11 / 10 / 2008
	Mailing Address 3060 WILLIAMS DR., STE. 200	Amount of Each Disbursement this Period 165.76
	City FAIRFAX State VA Zip Code 22031	
	Purpose of Disbursement PAYROLL SERVICE	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	729.36
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 17 / 19

<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.17
	Mailing Address 3060 WILLIAMS DR., STE. 200	Date of Disbursement MM / DD / YYYY 11 / 15 / 2008
	City FAIRFAX State VA Zip Code 22031	Amount of Each Disbursement this Period 558.20
	Purpose of Disbursement STAFF & CONSULTANTS	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) PRECISION LISTS, INC.	Transaction ID: SB.18
	Mailing Address 901 MONROE ST., STE. 1309	Date of Disbursement MM / DD / YYYY 11 / 11 / 2008
	City ARLINGTON State VA Zip Code 22201	Amount of Each Disbursement this Period 11936.11
	Purpose of Disbursement PAC DIRECT MAIL LIST	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) PRECISION MARKETING	Transaction ID: SB.19
	Mailing Address PO BOX 6446	Date of Disbursement MM / DD / YYYY 10 / 27 / 2008
	City ARLINGTON State VA Zip Code 22206	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement PAC DIRECT MAIL	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)	▶	13994.31
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 18 / 19

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

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NAME OF COMMITTEE (In Full)
Battle Born PAC

A.	Full Name (Last, First, Middle Initial) RON STESLOW	Transaction ID: SB.20 Date of Disbursement 10 / 31 / 2008
	Mailing Address 425 2ND ST., NE	Amount of Each Disbursement this Period 183.97
	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) RON STESLOW	Transaction ID: SB.21 Date of Disbursement 11 / 15 / 2008
	Mailing Address 425 2ND ST., NE	Amount of Each Disbursement this Period 183.97
	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) ▼

C.	Full Name (Last, First, Middle Initial) WACHOVIA	Transaction ID: SB.22 Date of Disbursement 11 / 12 / 2008
	Mailing Address 7901 WISCONSIN AVE.	Amount of Each Disbursement this Period 65.50
	City BETHESDA State MD Zip Code 20814	
	Purpose of Disbursement BANK CHARGES 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)	433.44
TOTAL This Period (last page this line number only)	21876.19

**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 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) COLEMAN FOR SENATE <hr/> Mailing Address 680 TRANSFER RD., STE. A <hr/> City ST. PAUL State MN Zip Code 55114 <hr/> Purpose of Disbursement POLITICAL CONTRIBUTION-2008 Recount <hr/> Candidate Name Norm Coleman <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Recount	Transaction ID: SB.7 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00 <hr/> Category/ Type 011
B. Full Name (Last, First, Middle Initial) CHAMBLISS VICTORY COMMITTEE <hr/> Mailing Address PO BOX 75103 <hr/> City WASHINGTON State DC Zip Code 20013 <hr/> Purpose of Disbursement POLITICAL CONTRIBUTION <hr/> 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: SB.3 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 25000.00 <hr/> Category/ Type 011

SUBTOTAL of Disbursements This Page (optional) ►

30000.00

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

30000.00