

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

2015 OCT 16 PM 12:52

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

11th Congressional District Republican Party

ADDRESS (number and street)

P.O. BOX 1963



Check if different
than previously
reported. (ACC)

Bryson City

N.C.

28713

1963

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00165142

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☒ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

☐ Feb 20 (M2)

☐ May 20 (M5)

☐ Aug 20 (M8)

☐ Nov 20 (M11)
(Non-Election
Year Only)

☐ Mar 20 (M3)

☐ Jun 20 (M6)

☐ Sep 20 (M9)

☐ Dec 20 (M12)
(Non-Election
Year Only)

☐ Apr 20 (M4)

☐ Jul 20 (M7)

☐ Oct 20 (M10)

☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the
State of

M M / D D / Y Y Y Y

(d) 30-Day
POST-Election
Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the
State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 1 5

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 1 5

M M / D D / Y Y Y Y
0 7 / 0 1 / 2 0 1 5

through

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 1 5

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 1 5

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 1 5

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 Linda G. Dahl

Signature of Treasurer

Linda G. Dahl

Date

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

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

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

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

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

11th Congressional District Republican Party

Report Covering the Period:

From:

0 7 3 1 2 0 1 5

To:

0 9 3 0 2 0 1 5

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	2 0 1 5	1, 8 5 8 0 7
(b) Cash on Hand at Beginning of Reporting Period.....	3, 6 5 1 5 7	
(c) Total Receipts (from Line 19)	0 0 0	3, 6 6 5 0 0
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3, 6 5 1 5 7	5, 5 2 3 0 7
7. Total Disbursements (from Line 31)	8 8 2 6	1 9 5 8 7 6
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3, 5 6 3 3 1	3, 5 6 3 3 1
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

11th Congressional District Republican Party

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 0 7 / 0 1 / 2 0 1 5 To: ^{M M / D D / Y Y Y Y} 0 9 / 3 0 / 2 0 1 5

I. Receipts	COLUMN A Total This Period			COLUMN B Calendar Year-to-Date		
11. Contributions (other than loans) From:						
(a) Individuals/Persons Other Than Political Committees						
(i) Itemized (use Schedule A).....	,	,	.	,	,	.
(ii) Unitemized	,	,	0 - 0 0	,	,	0 . 0 0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	,	,	0 . 0 0	,	,	0 . 0 0
(b) Political Party Committees	,	,	0 - 0 0	,	,	0 - 0 0
(c) Other Political Committees (such as PACs).....	,	,	.	,	,	.
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	,	,	0 - 0 0	,	,	0 - 0 0
12. Transfers From Affiliated/Other Party Committees.....	,	,	.	,	,	.
13. All Loans Received	,	,	.	,	,	.
14. Loan Repayments Received.....	,	,	.	,	,	.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	,	,	.	,	,	.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	,	,	.	,	,	.
17. Other Federal Receipts (Dividends, Interest, etc.).....	,	,	.	,	,	.
18. Transfers from Non-Federal and Levin Funds						
(a) Non-Federal Account (from Schedule H3).....	,	,	.	,	,	.
(b) Levin Funds (from Schedule H5)	,	,	.	,	,	.
(c) Total Transfers (add 18(a) and 18(b))..	,	,	.	,	,	.
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	,	,	0 0 0 0	,	,	0 0 0 0
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	,	,	0 0 0 0	,	,	0 0 0 0

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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	8 8 2 6	1 9 5 8 7 6
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	8 8 2 6	1 9 5 8 7 6
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8 8 2 6	1 9 5 8 7 6
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	8 8 2 6	1 9 5 8 7 6

**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 1 OF 1

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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

NAME OF COMMITTEE (In Full)

11th Congressional District Republican Party

Full Name (Last, First, Middle Initial)

A.

Alive Webs- 1411

Date of Disbursement

0 9 0 9 2 0 1 5

Mailing Address

1856 Floyd Stalcup Road

City State Zip Code

Murphy, NC 28906

Purpose of Disbursement

Upkeep of District 11 Domain Name and Web maintenance

8 3

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

8 8 2 6

Office Sought: House
Senate
President

Disbursement For:
Primary General
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
Senate
President

Disbursement For:
Primary General
Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought: House
Senate
President

Disbursement For:
Primary General
Other (specify) ▼

State: District:

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

8 8 2 6

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

8 8 2 6

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0 0 0 0	0 0 0 0
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0 0 0 0	0 0 0 0
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0 0 0 0	0 0 0 0

P.O. Box 38
Bakersville, NC 28705

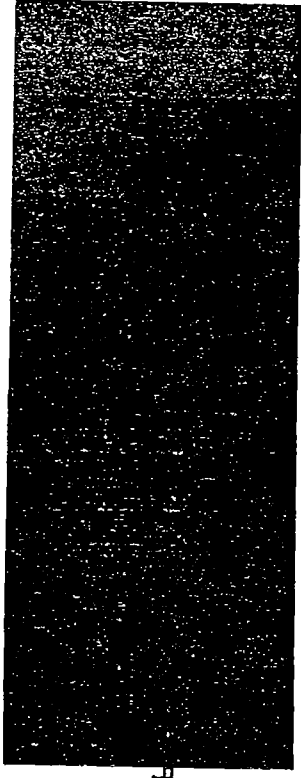
RECEIVED
FED MAIL CENTER
2015 OCT 16 AM 11:44



7015 0640 0001 3250 0396

Federal Election Commission

999 E. Street, NW
Washington, DC 20463



Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
---	-----------------

<input type="checkbox"/> USPS First Class Mail	Postmarked	Date of Receipt
--	------------	-----------------

<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)	10/10/15
---	------------------	----------

<input type="checkbox"/> USPS Priority Mail	Postmarked
---	------------

<input type="checkbox"/> USPS Priority Mail Express	Postmarked
---	------------

<input type="checkbox"/> Postmark Illegible	
---	--

<input type="checkbox"/> No Postmark	
--------------------------------------	--

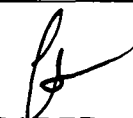
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>

<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
--	-----------------

<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
---	-----------------

<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
---	-------------------------------


PREPARER
(3/2015)

10/16/15
DATE PREPARED