

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Committee on Arrangements for the 2016 Republican National Convention

ADDRESS (number and street) ▼

310 First Street SE

☐ Check if different than previously reported. (ACC)

Washington

DC

20003

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00578419

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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2015

through

M M M / D D D / Y Y Y Y Y Y
08 31 2015

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 Anthony Parker

Signature of Treasurer

Anthony Parker

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
09 20 2015

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

Committee on Arrangements for the 2016 Republican National Convention

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
07 01 2015 To: M M / D D / Y Y Y Y Y Y
08 31 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	0.00	
(c) Total Receipts (from Line 19)	525100.00	525100.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	525100.00	525100.00
7. Total Disbursements (from Line 31)	143309.44	143309.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	381790.56	381790.56
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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Committee on Arrangements for the 2016 Republican National Convention

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	8		3	1		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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	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 Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	525100.00	525100.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (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))..... ►	525100.00	525100.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	525100.00	525100.00

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	143309.44	143309.44
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	143309.44	143309.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	143309.44	143309.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	143309.44	143309.44

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	143309.44	143309.44
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	143309.44	143309.44

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

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

FOR LINE NUMBER: PAGE 6 OF 35
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 01 / 2015

Transaction ID : SA12.4099

Amount of Each Receipt this Period

100.00

Transfer

Full Name (Last, First, Middle Initial)

B. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 09 / 2015

Transaction ID : SA12.4101

Amount of Each Receipt this Period

225000.00

Transfer

Full Name (Last, First, Middle Initial)

C. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 17 / 2015

Transaction ID : SA12.4102

Amount of Each Receipt this Period

150000.00

Transfer

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

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

375100.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 35
(check only one)

☐ 11a	☐ 11b	☐ 11c	☒ 12	☐ 13	☐ 14	☐ 15	☐ 16	☐ 17
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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

FEC ID number of contributing
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2015

Transaction ID : SA12.4103

Amount of Each Receipt this Period

150000.00

Transfer

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

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

150000.00

525100.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Sara Armstrong

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Reimbursement-travel

Candidate Name

Category/
Type**Transaction ID : SB21B.4304**

Amount of Each Disbursement this Period

572.16

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

Full Name (Last, First, Middle Initial)

B. United Airlines

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 233 S Wacker

City Chicago State IL Zip Code 60606

Purpose of Disbursement
airfare expense

Candidate Name

Category/
Type**Transaction ID : SB21B.4304.3**

Amount of Each Disbursement this Period

50.00

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. Westin Cleveland

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 777 St Clair Av NE

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Hotel

Candidate Name

Category/
Type**Transaction ID : SB21B.4304.4**

Amount of Each Disbursement this Period

392.42

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

572.16

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

Committee on Arrangements for the 2016 Republican National Convention

Category/
Type

127.47

Category/
Type

[MEMO ITEM]

Category/
Type

[MEMO ITEM]

127.47

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 35

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Sara ArmstrongMailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Reimbursement-travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2015

Transaction ID : SB21B.4321

Amount of Each Disbursement this Period

145.94

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S Wacker

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Airfare expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2015

Transaction ID : SB21B.4321.0

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Uber

Mailing Address 1455 Market St

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
taxi

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2015

Transaction ID : SB21B.4321.2

Amount of Each Disbursement this Period

101.50

[MEMO ITEM]

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

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

145.94

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Sara Armstrong

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Reimbursement - travel

Candidate Name

Category/
Type**Transaction ID : SB21B.4326**

Amount of Each Disbursement this Period

483.38

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Uber

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1455 Market St

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
Taxi

Candidate Name

Category/
Type**Transaction ID : SB21B.4326.5**

Amount of Each Disbursement this Period

32.66

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Enterprise

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1 Aviation Cir

City Washington State DC Zip Code 22023

Purpose of Disbursement
Car rental

Candidate Name

Category/
Type**Transaction ID : SB21B.4326.6**

Amount of Each Disbursement this Period

328.45

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

483.38

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 35

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Sara Armstrong

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Reimbursement-travel

Candidate Name

Category/
Type**Transaction ID : SB21B.4341**

Amount of Each Disbursement this Period

1939.70

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. United Airlines

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 233 S Wacker

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Airfare expense

Candidate Name

Category/
Type**Transaction ID : SB21B.4341.0**

Amount of Each Disbursement this Period

50.00

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Cleveland Chop

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8					3						2	0	1	5

Mailing Address 824 W St Clair Av

City Cleveland State OH Zip Code 44113

Purpose of Disbursement
Meeting Expense

Candidate Name

Category/
Type**Transaction ID : SB21B.4341.1**

Amount of Each Disbursement this Period

824.58

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

1939.70

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Uber

Mailing Address 1455 Market St

City San Francisco State CA Zip Code 94103

Purpose of Disbursement
taxi

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2015
Transaction ID : SB21B.4341.2

Amount of Each Disbursement this Period

39.32

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Westin Cleveland

Mailing Address 777 St Clair Av NE

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
hotel expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2015
Transaction ID : SB21B.4341.5

Amount of Each Disbursement this Period

987.09

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CAM Strategies

Mailing Address 30506 Lake Rd

City Bay Village State OH Zip Code 44140

Purpose of Disbursement
Contract Services - Community Outreach

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 09 / 2015
Transaction ID : SB21B.4129

Amount of Each Disbursement this Period

5000.00

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. CAM Strategies

Mailing Address 30506 Lake Rd

City Bay Village State OH Zip Code 44140

Purpose of Disbursement
Contract services - Community Outreach

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 28 / 2015

Transaction ID : SB21B.4135

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. Caroline DavidsonMailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Reimbursement-travel, Meeting expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : SB21B.4239

Amount of Each Disbursement this Period

2329.61

Full Name (Last, First, Middle Initial)

C. Hodges

Mailing Address 668 Euclid

City Cleveland State OH Zip Code 44114

Purpose of Disbursement
Meeting expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : SB21B.4239.5

Amount of Each Disbursement this Period

97.78

[MEMO ITEM]

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

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

12329.61

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

Committee on Arrangements for the 2016 Republican National Convention

Category/
Type

State: District:

Category/
Type

State: District:

Three digital displays showing the date 08/31/2015 in MM/DD/YYYY format. The first display shows '08' with 'M' labels above. The second shows '31' with 'D' labels above. The third shows '2015' with 'Y' labels above. Each display has a small square indicator above each digit.

Category/
Type

454.28

454.28

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Intuit Payroll Services

Mailing Address 2700 Coast Av

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Payroll tax payment

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 10 2015

Transaction ID : SB21B.4184

Amount of Each Disbursement this Period

11867.51

Full Name (Last, First, Middle Initial)

B. Intuit Payroll Services

Mailing Address 2700 Coast Av

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Payroll service fee

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 13 2015

Transaction ID : SB21B.4119

Amount of Each Disbursement this Period

93.96

Full Name (Last, First, Middle Initial)

C. Marcia KellyMailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Payroll-Salaries

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 15 2015

Transaction ID : SB21B.4110

Amount of Each Disbursement this Period

2430.48

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

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

14391.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Marcia Kelly

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				1	4						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Payroll-Salaries

001

Candidate Name

Category/
Type**Transaction ID : SB21B.4124**

Amount of Each Disbursement this Period

2430.48

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

Full Name (Last, First, Middle Initial)

B. Marcia Kelly

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Payroll-Salaries

001

Candidate Name

Category/
Type**Transaction ID : SB21B.4125**

Amount of Each Disbursement this Period

2430.49

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

Full Name (Last, First, Middle Initial)

C. Marcia Kelly

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Reimbursement-travelCategory/
Type**Transaction ID : SB21B.4299**

Amount of Each Disbursement this Period

844.28

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5705.25

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Renaissance Cleveland

Mailing Address 24 Public Square

City Cleveland State OH Zip Code 44133

Purpose of Disbursement
hotel expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : SB21B.4299.0

Amount of Each Disbursement this Period

768.54

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S Wacker

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Travel expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 31 / 2015

Transaction ID : SB21B.4299.2

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Steve King

Mailing Address 3508 N. Edgewood

City Janesville State WI Zip Code 53545

Purpose of Disbursement
Reimbursement-travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2015

Transaction ID : SB21B.4203

Amount of Each Disbursement this Period

3628.94

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

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

3628.94

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 233 S Wacker

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2015

Transaction ID : SB21B.4203.0

Amount of Each Disbursement this Period

249.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Ace Taxi

Mailing Address 1798 E 55th St

City Cleveland State OH Zip Code 44103

Purpose of Disbursement
Taxi

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2015

Transaction ID : SB21B.4203.2

Amount of Each Disbursement this Period

156.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Wyndham Playhouse Square

Mailing Address 1260 Euclid Av

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Hotel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2015

Transaction ID : SB21B.4203.3

Amount of Each Disbursement this Period

796.46

[MEMO ITEM]

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

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 PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address 233 S Wacker

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 06 2015

Transaction ID : SB21B.4203.5

Amount of Each Disbursement this Period

738.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address 233 S Wacker

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 06 2015

Transaction ID : SB21B.4203.7

Amount of Each Disbursement this Period

1004.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address 233 S Wacker

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 06 2015

Transaction ID : SB21B.4203.8

Amount of Each Disbursement this Period

427.20

[MEMO ITEM]

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

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

0.00

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

Committee on Arrangements for the 2016 Republican National Convention

A. Jeff Larson

Mailing Address 419 Galahad Rd N

City	State	Zip Code
Hudson	WI	54016

Purpose of Disbursement	Contract Services-Executive
-------------------------	-----------------------------

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President
State:	District:	

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement



Transaction ID : SB21B.4176

Amount of Each Disbursement this Period

16000.00

Full Name (Last, First, Middle Initial)

B. Law Offices of Heather Sidwell Morris

Mailing Address P.O. Box 173207

City	State	Zip Code
Tampa	FL	33672

Purpose of Disbursement	
Contract Services - Legal Fees	

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President
State:	District:	

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.4151

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Law Offices of Heather Sidwell Morris

Mailing Address P.O. Box 173207

City	State	Zip Code
Tampa	FL	33672

Purpose of Disbursement	
Travel Reimbursement	

Candidate Name

Office Sought:	☐	House
	☐	Senate
	☐	President
State:	District:	

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y
07 28 2015

Transaction ID : SB21B.4154

Amount of Each Disbursement this Period

950.93

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

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

21950.93

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. USAir

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	8						2	0	1	5

Mailing Address 201 East Jefferson St

City	State	Zip Code
Phoenix	AZ	85004

Transaction ID : SB21B.4154.0Purpose of Disbursement
Air Travel

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

415.20

[MEMO ITEM]

Office Sought:	House	Disbursement For:	☐ Primary	☐ General
	Senate		☐ Other (specify) ▼	
	President			

State: District:

Full Name (Last, First, Middle Initial)

B. Wyndham Playhouse Square

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	8						2	0	1	5

Mailing Address 1260 Euclid Av

City	State	Zip Code
Cleveland	OH	44115

Transaction ID : SB21B.4154.1Purpose of Disbursement
Hotel expense

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

392.30

[MEMO ITEM]

Office Sought:	House	Disbursement For:	☐ Primary	☐ General
	Senate		☐ Other (specify) ▼	
	President			

State: District:

Full Name (Last, First, Middle Initial)

C. Law Offices of Heather Sidwell Morris

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address P.O. Box 173207

City	State	Zip Code
Tampa	FL	33672

Transaction ID : SB21B.4274Purpose of Disbursement
Contract Services - legal

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

5000.00

Office Sought:	House	Disbursement For:	☐ Primary	☐ General
	Senate		☐ Other (specify) ▼	
	President			

State: District:

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

5000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Law Offices of Heather Sidwell Morris

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address P.O. Box 173207

City	State	Zip Code
Tampa	FL	33672

Transaction ID : SB21B.4275Purpose of Disbursement
Reimbursement-travel

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1598.40

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. Renaissance Cleveland

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 24 Public Square

City	State	Zip Code
Cleveland	OH	44133

Transaction ID : SB21B.4275.0Purpose of Disbursement
Hotel

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

927.36

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. USAir

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 201 East Jefferson St

City	State	Zip Code
Phoenix	AZ	85004

Transaction ID : SB21B.4275.8Purpose of Disbursement
Airfare

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

436.20

Office Sought:	☐ House
	☐ Senate
	☐ President

Disbursement For:	☐ Primary	☐ General
	☐ Other (specify) ▼	

State: District:

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

1	5	9	8	.	4	0
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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Monica Notzon

Mailing Address 180 Broad St2

City Charleston State SC Zip Code 29401

Purpose of Disbursement
Contract Services - Hotel consulting

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 31 2015

Transaction ID : SB21B.4182

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Jeremiah ShirkMailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Reimbursement-travel

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 28 2015

Transaction ID : SB21B.4165

Amount of Each Disbursement this Period

656.96

Full Name (Last, First, Middle Initial)

C. Renaissance Cleveland

Mailing Address 24 Public Square

City Cleveland State OH Zip Code 44133

Purpose of Disbursement
hotel expense

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 28 2015

Transaction ID : SB21B.4165.0

Amount of Each Disbursement this Period

427.89

[MEMO ITEM]

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

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

5656.96

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. USAir

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				2	8		2	0	1	5		

Mailing Address 201 East Jefferson St

City	State	Zip Code
Phoenix	AZ	85004

Transaction ID : SB21B.4165.4

Purpose of Disbursement
airfaire

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

Amount
75.00

Office Sought:	☐ House ☐ Senate ☐ President
State:	District:

Disbursement For:	☐ Primary ☐ General
	☐ Other (specify) ▼

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Jeremiah Shirk

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7				3	1		2	0	1	5		

Mailing Address 1228 Euclid Av
4th Fl

City	State	Zip Code
Cleveland	OH	44115

Transaction ID : SB21B.4114

Purpose of Disbursement
Payrol-Salaries

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
001

Amount
1968.77

Office Sought:	☐ House ☐ Senate ☐ President
State:	District:

Disbursement For:	☐ Primary ☐ General
	☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Jeremiah Shirk

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				0	6		2	0	1	5		

Mailing Address 1228 Euclid Av
4th Fl

City	State	Zip Code
Cleveland	OH	44115

Transaction ID : SB21B.4185

Purpose of Disbursement
Reimbursement-travel

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
002

Amount
742.02

Office Sought:	☐ House ☐ Senate ☐ President
State:	District:

Disbursement For:	☐ Primary ☐ General
	☐ Other (specify) ▼

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

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

2710.79

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. National Rental Car

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	5		

Mailing Address 7801 Col Weir Cook Dr

City	State	Zip Code
Indianapolis	IN	46241

Transaction ID : SB21B.4185.0

Purpose of Disbursement
Car Rental

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

449.28

[MEMO ITEM]

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. United Airlines

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	6			2	0	1	5		

Mailing Address 233 S Wacker

City	State	Zip Code
Chicago	IL	60606

Transaction ID : SB21B.4185.1

Purpose of Disbursement
Airfare

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

176.60

[MEMO ITEM]

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Jeremiah Shirk

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	4			2	0	1	5		

Mailing Address 1228 Euclid Av
4th Fl

City	State	Zip Code
Cleveland	OH	44115

Transaction ID : SB21B.4123

Purpose of Disbursement
Payroll-Salaries

Amount of Each Disbursement this Period

Candidate Name

001
Category/
Type

4180.95

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

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

4180.95

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Jeremiah Shirk

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Payroll-Salaries

001

Candidate Name

Category/
Type

Transaction ID : SB21B.4126

Amount of Each Disbursement this Period

4180.95

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Jeremiah Shirk

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Reimbursement-travel

Candidate Name

Category/
Type

Transaction ID : SB21B.4288

Amount of Each Disbursement this Period

600.60

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Anthem Blue Cross

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address P.O. Box 226777

City Dallas State TX Zip Code 75222

Purpose of Disbursement
health insurance reimbursement

Candidate Name

Category/
Type

Transaction ID : SB21B.4288.0

Amount of Each Disbursement this Period

450.57

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

[MEMO ITEM]

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

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

4	7	8	1	.	5	5
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Julie Shugar

Date of Disbursement

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

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Payroll- Salaries

001

Candidate Name

Category/
Type**Transaction ID : SB21B.4108**

Amount of Each Disbursement this Period

4407.19

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Julie Shugar

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Payroll-Salaries

001

Candidate Name

Category/
Type**Transaction ID : SB21B.4113**

Amount of Each Disbursement this Period

4407.19

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Julie Shugar

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				1	4						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Payroll-Salaries

001

Candidate Name

Category/
Type**Transaction ID : SB21B.4122**

Amount of Each Disbursement this Period

4407.19

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

13221.57

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Julie Shugar

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Payrol-Salaries

001

Candidate Name

Category/
Type**Transaction ID : SB21B.4127**

Amount of Each Disbursement this Period

4407.19

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Melinda Stell

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	7				2	3						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Health Insurance Stipend

001

Candidate Name

Category/
Type**Transaction ID : SB21B.4131**

Amount of Each Disbursement this Period

556.92

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Melinda Stell

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y		
0	8				3	1						2	0	1	5

Mailing Address 1228 Euclid Av
4th Fl

City Cleveland State OH Zip Code 44115

Purpose of Disbursement
Health insurance stipendCategory/
Type**Transaction ID : SB21B.4181**

Amount of Each Disbursement this Period

556.92

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

5521.03

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Committee on Arrangements for the 2016 Republican National Convention

A. Jan Sumrall

Date of Disbursement

Transaction ID : SB21B.4106

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

4414.95

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Jan Sumrall

Date of Disbursement

07 / 31 / 2015

Transaction ID : SB21B.4112

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

4134.29

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

State: District:

Full Name (Last, First, Middle Initial)

C. Jan Sumrall

Date of Disbursement

Transaction ID : SB21B.4218



Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2140.19

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

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

10689.43

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Committee on Arrangements for the 2016 Republican National Convention

Full Name (Last, First, Middle Initial)

A. Intuit Software

Mailing Address 2700 Coast Av

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
software

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2015

Transaction ID : SB21B.4218.3

Amount of Each Disbursement this Period

217.59

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address P.O. Box 20706

City Atlanta State GA Zip Code 30320

Purpose of Disbursement
Airfare

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2015

Transaction ID : SB21B.4218.8

Amount of Each Disbursement this Period

509.20

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Office of Group Benefits

Mailing Address 1201 North 3rd St

City Baton Rouge State LA Zip Code 70802

Purpose of Disbursement
Health Insurance reimbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 06 / 2015

Transaction ID : SB21B.4218.9

Amount of Each Disbursement this Period

901.36

[MEMO ITEM]

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

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

0.00

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

Committee on Arrangements for the 2016 Republican National Convention

A. Jan Sumrall

Date of Disbursement

Transaction ID : SB21B.4121

001

Amount of Each Disbursement this Period

Candidate Name _____

Category/
Type

4134.29

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B. Jan Sumrall

Date of Disbursement

Transaction ID : SB21B.4128

001

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

4124.00

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. The Trailblazer Group

Date of Disbursement

08 / 31 / 2015

Transaction ID : SB21B.4352

1

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1200.88

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

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

9469.46

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

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

Committee on Arrangements for the 2016 Republican National Convention

622.19

[MEMO ITEM]

08 / 31 / 2015

6.84

[MEMO ITEM]

08 / 31 / 2015

459.01

[MEMO ITEM]

0.00

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

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

Committee on Arrangements for the 2016 Republican National Convention

A. Union Club

001

56.44

Category/
Type

Disbursement For:

☐	Primary	☐	General
☐	Other (specify) ▼		

Full Name (Last, First, Middle Initial)

B. Wiley Rein

07 / 28 / 2015

001

5000.00

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Wiley Rein

category

5000.00

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

10056.44

143077.50