

**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

REPUBLICAN MAJORITY CAMPAIGN

ADDRESS (number and street) ▼

13421 MALENA DR

☐ Check if different than previously reported. (ACC)

SANTA ANA

CA

92705

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00442319

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 2011

through

M M M / D D D / Y Y Y Y Y Y  
09 30 2011

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 Randy Goodwin

Signature of Treasurer

Randy Goodwin

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
10 15 2011

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

REPUBLICAN MAJORITY CAMPAIGN

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2011 To: MM / DD / YYYY 09 / 30 / 2011

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">YYYYYY</span> 2011        |                         | 38581.75                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....                                                        | 50114.89                |                                   |
| (c) Total Receipts (from Line 19) .....                                                                          | 416338.00               | 1717448.64                        |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 466452.89               | 1756030.39                        |
| 7. Total Disbursements (from Line 31) .....                                                                      | 436793.10               | 1726370.60                        |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 29659.79                | 29659.79                          |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 6964.15                 |                                   |



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

**REPUBLICAN MAJORITY CAMPAIGN**

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
07 01 2011

To:

M M / D D / Y Y Y Y Y  
09 30 2011

**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).....**

4425.00

17435.00

**(ii) Unitemized .....**

411913.00

1699187.64

**(iii) TOTAL (add**

Lines 11(a)(i) and (ii)..... ▶

416338.00

1716622.64

**(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) ..... ▶

416338.00

1716622.64

**12. Transfers From Affiliated/Other**

Party Committees.....

0.00

0.00

**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

826.00

**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))..... ▶**

416338.00

1717448.64

**20. Total Federal Receipts**

(subtract Line 18(c) from Line 19) ..... ▶

416338.00

1717448.64

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements                                                                              | COLUMN A<br>Total This Period | COLUMN B<br>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 .....                                                 | 434543.10                     | 1012120.52                        |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 434543.10                     | 1012120.52                        |
| 22. Transfers to Affiliated/Other Party Committees.....                                        | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 3850.00                           |
| 24. Independent Expenditures (use Schedule E) .....                                            | 2250.00                       | 710400.08                         |
| 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)) ..      | 436793.10                     | 1726370.60                        |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 436793.10                     | 1726370.60                        |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                          | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|----------------------------------------------------------------------------------------|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 416338.00                     | 1716622.64                        |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 416338.00                     | 1716622.64                        |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 434543.10                     | 1012120.52                        |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 434543.10                     | 1012120.52                        |

# **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 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

## **A. Ramin Akhbari**

Mailing Address 210 Marianna Way

City State Zip Code  
Campbell CA 95008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

You Send It

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2011

**Transaction ID : SA11AI.6785**

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Ramin Akhbari**

Mailing Address 210 Marianna Way

City State Zip Code  
Campbell CA 95008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

You Send It

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 10 / 2011

**Transaction ID : SA11AI.6787**

Amount of Each Receipt this Period

50.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Ramin Akhbari**

Mailing Address 210 Marianna Way

City State Zip Code  
Campbell CA 95008

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

You Send It

Software Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 05 / 2011

**Transaction ID : SA11AI.6786**

Amount of Each Receipt this Period

100.00

Contribution

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

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

250.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 7 OF 55

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Gary Akin**

Mailing Address 37090 S. Geo Mason Dr

City State Zip Code  
 Falls Church VA 22041

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

07 / 03 / 2011

Transaction ID : SA11AI.6783

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Mr Joseph Brierre**

Mailing Address 140 Twin Oaks Bl

City State Zip Code  
 Lafayette LA 70503

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

07 / 20 / 2011

Transaction ID : SA11AI.6622

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Carolyn Chandler**

Mailing Address 6920 E Ridge Dr

City State Zip Code  
 Shreveport LA 71106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 29 / 2011

Transaction ID : SA11AI.6625

Amount of Each Receipt this Period

250.00

Contribution

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

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

600.00

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

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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

## **A. Edie Dowdle**

Mailing Address 219 Huckleberry Hills Rd

City State Zip Code  
Columbus MS 39705

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 13 / 2011

Transaction ID : SA11AI.6790

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Mr Richard Hall**

Mailing Address 361 Baptist Hill Rd

City State Zip Code  
Canterbury NH 03224

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Paul's School

Occupation

Cook

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

07 / 19 / 2011

Transaction ID : SA11AI.6626

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Mr Richard Hall**

Mailing Address 361 Baptist Hill Rd

City State Zip Code  
Canterbury NH 03224

FEC ID number of contributing  
federal political committee.

C

Name of Employer

St. Paul's School

Occupation

Cook

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

09 / 17 / 2011

Transaction ID : SA11AI.6627

Amount of Each Receipt this Period

100.00

Contribution

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

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

400.00

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

## **A. Wayne Holman**

Mailing Address 615 Riford Rd

City State Zip Code  
Glen Ellyn IL 60137

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 11 / 2011

Transaction ID : SA11AI.6778

Amount of Each Receipt this Period

500.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. Lee Holmes**

Mailing Address 530 W Obrien

City State Zip Code  
Hagatna GU 96910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 05 / 2011

Transaction ID : SA11AI.6777

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Lee Holmes**

Mailing Address 530 W Obrien

City State Zip Code  
Hagatna GU 96910

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 11 / 2011

Transaction ID : SA11AI.6775

Amount of Each Receipt this Period

500.00

Contribution

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

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

1200.00

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

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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 10 OF 55

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Mr Konrad Kono**

Mailing Address 7674 Dartmoor Ave

City State Zip Code  
 Goleta CA 93117

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

08 / 09 / 2011

Transaction ID : SA11AI.6628

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Noel Meisner**

Mailing Address PO Box 605

City State Zip Code  
 Asotin WA 99402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 02 / 2011

Transaction ID : SA11AI.6639

Amount of Each Receipt this Period

250.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Ron Milam**

Mailing Address 1489 Lafite Lane

City State Zip Code  
 Fayetteville AR 72703

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self

Small Business Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 10 / 2011

Transaction ID : SA11AI.6641

Amount of Each Receipt this Period

250.00

Contribution

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

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

750.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

## **A. Ms Barbara Miner**

Mailing Address 1831 Sabal Palm Dr

City State Zip Code  
Boca Raton FL 33432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 09 / 2011

Transaction ID : SA11AI.6634

Amount of Each Receipt this Period

200.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. John Peck Jr.**

Mailing Address PO Box 829

City State Zip Code  
Rancho Santa Fe CA 92067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 10 / 2011

Transaction ID : SA11AI.6779

Amount of Each Receipt this Period

400.00

Contribution

Full Name (Last, First, Middle Initial)

## **C. Harold Perry**

Mailing Address 7940 E Camelback Rd

City State Zip Code  
Scottsdale AZ 85251

FEC ID number of contributing  
federal political committee.

C

Name of Employer

None

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 01 / 2011

Transaction ID : SA11AI.6795

Amount of Each Receipt this Period

100.00

Contribution

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

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

700.00

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

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

FOR LINE NUMBER: PAGE 12 OF 55

(check only one)

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

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Ms Martha Riddle**

Mailing Address 31853 Rabbit Springs Rd

City State Zip Code  
 Lucerne Valley CA 92356

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

None

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 08 01 2011

Transaction ID : SA11AI.6635

Amount of Each Receipt this Period

100.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Thomas Ward**

Mailing Address 6630 Richardson Rd

City State Zip Code  
 Houston TX 77069

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 09 10 2011

Transaction ID : SA11AI.6781

Amount of Each Receipt this Period

400.00

Contribution

Full Name (Last, First, Middle Initial)

**C. William Weissmann**

Mailing Address 53 Royal Rd

City State Zip Code  
 Freehold NJ 07728

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

None

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 08 21 2011

Transaction ID : SA11AI.6637

Amount of Each Receipt this Period

25.00

Contribution

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

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

525.00

4425.00

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

NAME OF COMMITTEE (In Full)  
**REPUBLICAN MAJORITY CAMPAIGN**

Three digital displays are shown, each with a label above it: 'M' (Month), 'D' (Day), and 'Y' (Year). The first display shows '07' under 'M'. The second display shows '07' under 'D'. The third display shows '2011' under 'Y'.

Category/  
Type

99.50

M M / D D / Y Y Y Y  
07 14 2011

Category/  
Type

511.21

07 / 20 / 2011

Category/  
Type

89.00

699.71

\_\_\_\_\_

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 OF 55

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

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

## **A. ADP**

Mailing Address 8825 Aero Dr

City San Diego State CA Zip Code 92123

Purpose of Disbursement  
Withholding

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 Y Y  
07 / 29 / 2011

**Transaction ID : SB21B.6688**

Amount of Each Disbursement this Period

643.97

Full Name (Last, First, Middle Initial)

## **B. ADP**

Mailing Address 8825 Aero Dr

City San Diego State CA Zip Code 92123

Purpose of Disbursement  
Payroll Service

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 Y Y  
08 / 03 / 2011

**Transaction ID : SB21B.6714**

Amount of Each Disbursement this Period

94.00

Full Name (Last, First, Middle Initial)

## **C. ADP**

Mailing Address 8825 Aero Dr

City San Diego State CA Zip Code 92123

Purpose of Disbursement  
Withholding

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 Y Y  
08 / 15 / 2011

**Transaction ID : SB21B.6721**

Amount of Each Disbursement this Period

592.33

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

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

1330.30

**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 15 OF 55

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

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 8825 Aero Dr

City San Diego      State CA      Zip Code 92123

Purpose of Disbursement  
Payroll Service

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      24      2011
**Transaction ID : SB21B.6725**

Amount of Each Disbursement this Period

91.50

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 8825 Aero Dr

City San Diego      State CA      Zip Code 92123

Purpose of Disbursement  
Withholding

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      2011
**Transaction ID : SB21B.6728**

Amount of Each Disbursement this Period

891.17

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 8825 Aero Dr

City San Diego      State CA      Zip Code 92123

Purpose of Disbursement  
Payroll Service

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  
09      08      2011
**Transaction ID : SB21B.6735**

Amount of Each Disbursement this Period

94.00

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

1076.67

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. ADP**

Mailing Address 8825 Aero Dr

City San Diego      State CA      Zip Code 92123

Purpose of Disbursement  
Withholding

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  
09 / 15 / 2011
**Transaction ID : SB21B.6737**

Amount of Each Disbursement this Period

716.36

Full Name (Last, First, Middle Initial)

**B. ADP**

Mailing Address 8825 Aero Dr

City San Diego      State CA      Zip Code 92123

Purpose of Disbursement  
Payroll Service

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  
09 / 21 / 2011
**Transaction ID : SB21B.6744**

Amount of Each Disbursement this Period

91.50

Full Name (Last, First, Middle Initial)

**C. ADP**

Mailing Address 8825 Aero Dr

City San Diego      State CA      Zip Code 92123

Purpose of Disbursement  
Withholding

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  
09 / 29 / 2011
**Transaction ID : SB21B.6745**

Amount of Each Disbursement this Period

702.72

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

1510.58

**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 17 OF 55

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

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Amazon**

Mailing Address PO Box 81225

City Seattle      State WA      Zip Code 98108

Purpose of Disbursement  
Book

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 / 11 / 2011
**Transaction ID : SB21B.6669**

Amount of Each Disbursement this Period

13.99

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale      State FL      Zip Code 33336

Purpose of Disbursement  
Collection 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  
07 / 05 / 2011
**Transaction ID : SB21B.6664**

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

**C. American Express**

Mailing Address PO Box 360001

City Ft Lauderdale      State FL      Zip Code 33336

Purpose of Disbursement  
Collection 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 / 03 / 2011
**Transaction ID : SB21B.6713**

Amount of Each Disbursement this Period

7.95

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

29.89

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

NAME OF COMMITTEE (In Full)  
**REPUBLICAN MAJORITY CAMPAIGN**

7.95

312.00

312.00

631.95

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

NAME OF COMMITTEE (In Full)  
REPUBLICAN MAJORITY CAMPAIGN

### A. Darshan Brahmabhatt

Mailing Address 932 D Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Ramona | CA    | 92065    |

### Purpose of Disbursement

#### Administrative Services

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

State:  District:

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

Date of Disbursement

Transaction ID : SB21B.6658

Amount of Each Disbursement this Period

Percentage

250.00

18-24  
25-34  
35-44  
45-54  
55-64  
65-74  
75-84  
85+

Full Name (Last, First, Middle Initial)

### B. Darshan Brahmabhatt

Mailing Address 932 D Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Ramona | CA    | 92065    |

| Purpose of Disbursement |  |
|-------------------------|--|
| Administrative services |  |

| Candidate Name | Age | Gender | Marital Status | Religion | Ethnicity | Education Level | Occupation | Income | Assets | Liabilities | Net Worth | Debt-to-Income Ratio | Credit Score | Loan History | Bankruptcy History | Insurance Coverage | Health Status | Family Size | Employment Stability | Housing Situation | Moving Costs | Real Estate Market Trends | Interest Rates | Tax Implications | Legal Considerations | Financial Planning | Risk Assessment | Investment Opportunities | Retirement Savings | Estate Planning | Charitable Contributions | Gift Tax Exemptions | Estate Tax Exemptions | Capital Gains Tax | Dividend Income | Pension Plans | 401(k) Plans | IRA Accounts | 529 College Savings | Uganda | Rwanda | DRC | Burundi | Zambia | Malawi | Mozambique | Angola | Nigeria | Ghana | Ivory Coast | Liberia | Seychelles | Comoros | Madagascar | Reunion Island | Mayotte | French Polynesia | New Caledonia | Wallis and Futuna | San Marino | Vatican City | Monaco | Liechtenstein | Norway | Sweden | Denmark | Finland | Iceland | Austria | Switzerland | Germany | France | Italy | Spain | Portugal | Greece | Turkey | Israel | Jordan | Lebanon | Syria | Yemen | Oman | UAE | Saudi Arabia | Qatar | Bahrain | Kuwait | Brunei | Malaysia | Singapore | Thailand | Philippines | Indonesia | Myanmar | Burma | Laos | Cambodia | Vietnam | China | Japan | Korea | South Korea | Taiwan | Hong Kong | Macao | Macau | Timor-Leste | East Timor | Palau | Micronesia | Marshall Islands | Northern Mariana Islands | Guam | Northern Marianas | Guam | Armenia | Georgia | Azerbaijan | Belarus | Poland | Czech Republic | Slovakia | Hungary | Croatia | Slovenia | Bulgaria | Romania | Bosnia and Herzegovina | Serbia | Montenegro | Albania | Moldova | Ukraine | Belgium | Netherlands | Luxembourg | France | Germany | Italy | Spain | Portugal | Greece | Turkey | Israel | Jordan | Lebanon | Syria | Yemen | Oman | UAE | Saudi Arabia | Qatar | Bahrain | Kuwait | Brunei | Malaysia | Singapore | Thailand | Philippines | Indonesia | Myanmar | Burma | Laos | Cambodia | Vietnam | China | Japan | Korea | South Korea | Taiwan | Hong Kong | Macao | Macau | Timor-Leste | East Timor | Palau | Micronesia | Marshall Islands | Northern Mariana Islands | Guam | Northern Marianas | Guam | Armenia | Georgia | Azerbaijan | Belarus | Poland | Czech Republic | Slovakia | Hungary | Croatia | Slovenia | Bulgaria | Romania | Bosnia and Herzegovina | Serbia | Montenegro | Albania | Moldova | Ukraine | Belgium | Netherlands | Luxembourg | France | Germany | Italy | Spain | Portugal | Greece | Turkey | Israel | Jordan | Lebanon | Syria | Yemen | Oman | UAE | Saudi Arabia | Qatar | Bahrain | Kuwait | Brunei | Malaysia | Singapore | Thailand | Philippines | Indonesia | Myanmar | Burma | Laos | Cambodia | Vietnam | China | Japan | Korea | South Korea | Taiwan | Hong Kong | Macao | Macau | Timor-Leste | East Timor | Palau | Micronesia | Marshall Islands | Northern Mariana Islands | Guam | Northern Marianas | Guam | Armenia | Georgia | Azerbaijan | Belarus | Poland | Czech Republic | Slovakia | Hungary | Croatia | Slovenia | Bulgaria | Romania | Bosnia and Herzegovina | Serbia | Montenegro | Albania | Moldova | Ukraine | Belgium | Netherlands | Luxembourg | France | Germany | Italy | Spain | Portugal | Greece | Turkey | Israel | Jordan | Lebanon | Syria | Yemen | Oman | UAE | Saudi Arabia | Qatar | Bahrain | Kuwait | Brunei | Malaysia | Singapore | Thailand | Philippines | Indonesia | Myanmar | Burma | Laos | Cambodia | Vietnam | China | Japan | Korea | South Korea | Taiwan | Hong Kong | Macao | Macau | Timor-Leste | East Timor | Palau | Micronesia | Marshall Islands | Northern Mariana Islands | Guam | Northern Marianas | Guam | Armenia | Georgia | Azerbaijan | Belarus | Poland | Czech Republic | Slovakia | Hungary | Croatia | Slovenia | Bulgaria | Romania | Bosnia and Herzegovina | Serbia | Montenegro | Albania | Moldova | Ukraine | Belgium | Netherlands | Luxembourg | France | Germany | Italy | Spain | Portugal | Greece | Turkey | Israel | Jordan | Lebanon | Syria | Yemen | Oman | UAE | Saudi Arabia | Qatar | Bahrain | Kuwait | Brunei | Malaysia | Singapore | Thailand | Philippines | Indonesia | Myanmar | Burma | Laos | Cambodia | Vietnam | China | Japan | Korea | South Korea | Taiwan | Hong Kong | Macao | Macau | Timor-Leste | East Timor | Palau | Micronesia | Marshall Islands | Northern Mariana Islands | Guam | Northern Marianas | Guam | Armenia | Georgia | Azerbaijan | Belarus | Poland | Czech Republic | Slovakia | Hungary | Croatia | Slovenia | Bulgaria | Romania | Bosnia and Herzegovina | Serbia | Montenegro | Albania | Moldova | Ukraine | Belgium | Netherlands | Luxembourg | France | Germany | Italy | Spain | Portugal | Greece | Turkey | Israel | Jordan | Lebanon | Syria | Yemen | Oman | UAE | Saudi Arabia | Qatar | Bahrain | Kuwait | Brunei | Malaysia | Singapore | Thailand | Philippines | Indonesia | Myanmar | Burma | Laos | Cambodia | Vietnam | China | Japan | Korea | South Korea | Taiwan | Hong Kong | Macao | Macau | Timor-Leste | East Timor | Palau | Micronesia | Marshall Islands | Northern Mariana Islands | Guam | Northern Marianas | Guam | Armenia | Georgia | Azerbaijan | Belarus | Poland | Czech Republic | Slovakia | Hungary | Croatia | Slovenia | Bulgaria | Romania | Bosnia and Herzegovina | Serbia | Montenegro | Albania | Moldova | Ukraine | Belgium | Netherlands | Luxembourg | France | Germany | Italy | Spain | Portugal | Greece | Turkey | Israel | Jordan | Lebanon | Syria | Yemen | Oman | UAE | Saudi Arabia | Qatar | Bahrain | Kuwait | Brunei | Malaysia | Singapore | Thailand | Philippines | Indonesia | Myanmar | Burma | Laos | Cambodia | Vietnam | China | Japan | Korea | South Korea | Taiwan | Hong Kong | M |
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|                |                          |           |
|----------------|--------------------------|-----------|
| 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) ▼ |                          |         |

Date of Disbursement

07 / 15 / 2011

Transaction ID : SB21B.6651

Amount of Each Disbursement this Period

232.04

Full Name (Last, First, Middle Initial)

### C. Darshan Brahmabhatt

Mailing Address 932 D Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Ramona | CA    | 92065    |

### Purpose of Disbursement Administrative Services

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

State:  District:

Date of Disbursement

Transaction ID : SB21B.6694

Amount of Each Disbursement this Period

232.05

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

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

714.09

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Darshan Brahmbhatt**

Mailing Address 932 D Street

City Ramona State CA Zip Code 92065

Purpose of Disbursement  
Admin Services

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 15 2011
**Transaction ID : SB21B.6699**

Amount of Each Disbursement this Period

232.04

Full Name (Last, First, Middle Initial)

**B. Darshan Brahmbhatt**

Mailing Address 932 D Street

City Ramona State CA Zip Code 92065

Purpose of Disbursement  
Admin Services

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  
09 01 2011
**Transaction ID : SB21B.6765**

Amount of Each Disbursement this Period

232.05

Full Name (Last, First, Middle Initial)

**C. Darshan Brahmbhatt**

Mailing Address 932 D Street

City Ramona State CA Zip Code 92065

Purpose of Disbursement  
Admin Services

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  
09 15 2011
**Transaction ID : SB21B.6766**

Amount of Each Disbursement this Period

232.04

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

696.13

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. California Bank & Trust**

Mailing Address PO Box 489

City Lawndale      State CA      Zip Code 90260

Purpose of Disbursement  
Wire 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  
07      05      2011
**Transaction ID : SB21B.6666**

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. California Bank & Trust**

Mailing Address PO Box 489

City Lawndale      State CA      Zip Code 90260

Purpose of Disbursement  
Wire 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  
07      14      2011
**Transaction ID : SB21B.6674**

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C. California Bank & Trust**

Mailing Address PO Box 489

City Lawndale      State CA      Zip Code 90260

Purpose of Disbursement  
Wire free

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      19      2011
**Transaction ID : SB21B.6683**

Amount of Each Disbursement this Period

12.00

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

54.00

**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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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. California Bank & Trust**

Mailing Address PO Box 489

City Lawndale      State CA      Zip Code 90260

Purpose of Disbursement  
Wire 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      04      2011
**Transaction ID : SB21B.6715**

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. California Bank & Trust**

Mailing Address PO Box 489

City Lawndale      State CA      Zip Code 90260

Purpose of Disbursement  
Wire 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      12      2011
**Transaction ID : SB21B.6720**

Amount of Each Disbursement this Period

30.00

Full Name (Last, First, Middle Initial)

**C. California Bank & Trust**

Mailing Address PO Box 489

City Lawndale      State CA      Zip Code 90260

Purpose of Disbursement  
Wire 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      16      2011
**Transaction ID : SB21B.6722**

Amount of Each Disbursement this Period

12.00

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

54.00

**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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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. California Bank & Trust**

Mailing Address PO Box 489

City Lawndale      State CA      Zip Code 90260

Purpose of Disbursement  
Wire 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      23      2011
**Transaction ID : SB21B.6724**

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**B. California Bank & Trust**

Mailing Address PO Box 489

City Lawndale      State CA      Zip Code 90260

Purpose of Disbursement  
Wire 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  
09      06      2011
**Transaction ID : SB21B.6733**

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**C. California Bank & Trust**

Mailing Address PO Box 489

City Lawndale      State CA      Zip Code 90260

Purpose of Disbursement  
Wire 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  
09      20      2011
**Transaction ID : SB21B.6742**

Amount of Each Disbursement this Period

12.00

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

36.00

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## REPUBLICAN MAJORITY CAMPAIGN

### A. California Bank & Trust

Mailing Address PO Box 489

|          |       |          |
|----------|-------|----------|
| City     | State | Zip Code |
| Lawndale | CA    | 90260    |

| Purpose of Disbursement |
|-------------------------|
| Wire fee                |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

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

Date of Disbursement

Transaction ID : SB21B.6743

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

## B. Card Service International

Mailing Address PO Box 5180

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Simi Valley | CA    | 93062    |

| Purpose of Disbursement   |
|---------------------------|
| Credit Card Discount Fees |

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) ▼ |                          |         |

Date of Disbursement

07 / 31 / 2011

Transaction ID : SB21B.6605

Amount of Each Disbursement this Period

983.35

Full Name (Last, First, Middle Initial)

### C. Card Service International

Mailing Address PO Box 5180

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| Simi Valley | CA    | 93062    |

| Purpose of Disbursement | Credit Card Discount Fees |
|-------------------------|---------------------------|
|                         |                           |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.6612

Amount of Each Disbursement this Period

915.26

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

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

1928.61

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Card Service International**

Mailing Address PO Box 5180

City Simi Valley      State CA      Zip Code 93062

Purpose of Disbursement  
Credit Card Discount Fees

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  
09      30      2011
**Transaction ID : SB21B.6621**

Amount of Each Disbursement this Period

725.99

Full Name (Last, First, Middle Initial)

**B. Daniel Paul Diaz**

Mailing Address 709 Garden Drive

City Pompano Beach      State FL      Zip Code 34243

Purpose of Disbursement  
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      26      2011
**Transaction ID : SB21B.6746**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Daniel Paul Diaz**

Mailing Address 709 Garden Drive

City Pompano Beach      State FL      Zip Code 34243

Purpose of Disbursement  
Postal Box Rental

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  
09      21      2011
**Transaction ID : SB21B.6771**

Amount of Each Disbursement this Period

460.00

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

1435.99

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Betty Doomey**

Mailing Address 932 D Street

City Ramona      State CA      Zip Code 92065

Purpose of Disbursement  
Clerical/bookkeeping Services

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      01      2011
**Transaction ID : SB21B.6657**

Amount of Each Disbursement this Period

341.35

Full Name (Last, First, Middle Initial)

**B. Betty Doomey**

Mailing Address 932 D Street

City Ramona      State CA      Zip Code 92065

Purpose of Disbursement  
Clerical Service

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      18      2011
**Transaction ID : SB21B.6646**

Amount of Each Disbursement this Period

108.53

Full Name (Last, First, Middle Initial)

**C. Betty Doomey**

Mailing Address 932 D Street

City Ramona      State CA      Zip Code 92065

Purpose of Disbursement  
Bookkeeping Services

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      01      2011
**Transaction ID : SB21B.6710**

Amount of Each Disbursement this Period

208.31

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

658.19

**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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|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Betty Doomey**

Mailing Address 932 D Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Ramona | CA    | 92065    |

Purpose of Disbursement  
Bookkeeping Services

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 08    |   | 15    |   | 2011        |

**Transaction ID : SB21B.6705**

Amount of Each Disbursement this Period

|        |
|--------|
| 208.31 |
|--------|

Full Name (Last, First, Middle Initial)

**B. Betty Doomey**

Mailing Address 932 D Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Ramona | CA    | 92065    |

Purpose of Disbursement  
Bookkeeping Services

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 01    |   | 2011        |

**Transaction ID : SB21B.6769**

Amount of Each Disbursement this Period

|        |
|--------|
| 208.31 |
|--------|

Full Name (Last, First, Middle Initial)

**C. Betty Doomey**

Mailing Address 932 D Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Ramona | CA    | 92065    |

Purpose of Disbursement  
Bookkeeping Services

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 16    |   | 2011        |

**Transaction ID : SB21B.6755**

Amount of Each Disbursement this Period

|        |
|--------|
| 175.05 |
|--------|

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

591.67

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

## **A. Enterprise Rent-a-Car**

Mailing Address 1325 Dyer Rd

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement  
Car Rental

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  
07 19 2011

**Transaction ID : SB21B.6678**

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

## **B. Enterprise Rent-a-Car**

Mailing Address 1325 Dyer Rd

City Santa Ana State CA Zip Code 92705

Purpose of Disbursement  
Car Rental

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  
07 20 2011

**Transaction ID : SB21B.6685**

Amount of Each Disbursement this Period

418.67

Full Name (Last, First, Middle Initial)

## **C. Farmer's Group**

Mailing Address 23161 Mill Creek Dr

City Laguna Hills State CA Zip Code 92653

Purpose of Disbursement  
Insurance

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  
07 19 2011

**Transaction ID : SB21B.6682**

Amount of Each Disbursement this Period

718.57

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

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

1437.24

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Management Services

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 / 01 / 2011
**Transaction ID : SB21B.6653**

Amount of Each Disbursement this Period

1117.92

Full Name (Last, First, Middle Initial)

**B. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Medical

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 / 05 / 2011
**Transaction ID : SB21B.6659**

Amount of Each Disbursement this Period

1100.00

Full Name (Last, First, Middle Initial)

**C. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Accounting Services

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 / 14 / 2011
**Transaction ID : SB21B.6660**

Amount of Each Disbursement this Period

1600.00

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

3817.92

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Randy Goodwin**

Date of Disbursement

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

Mailing Address 13421 Malena Dr

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Santa Ana | CA    | 92705    |

**Transaction ID : SB21B.6650**Purpose of Disbursement  
Management Services

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1117.91

|                |                                    |
|----------------|------------------------------------|
| 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:

Full Name (Last, First, Middle Initial)

**B. Randy Goodwin**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |   |   |
| 0 | 7 |   |   |   | 2 | 0 |   |   |   |   |   | 2 | 0 | 1 | 1 |

Mailing Address 13421 Malena Dr

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Santa Ana | CA    | 92705    |

**Transaction ID : SB21B.6649**Purpose of Disbursement  
Postage expense

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

660.00

|                |                                    |
|----------------|------------------------------------|
| 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:

Full Name (Last, First, Middle Initial)

**C. Randy Goodwin**

Date of Disbursement

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

Mailing Address 13421 Malena Dr

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Santa Ana | CA    | 92705    |

**Transaction ID : SB21B.6702**Purpose of Disbursement  
Management Services

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1117.92

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

2895.83

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Medical Ins

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 / 09 / 2011
**Transaction ID : SB21B.6695**

Amount of Each Disbursement this Period

550.00

Full Name (Last, First, Middle Initial)

**B. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Management Services

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 / 16 / 2011
**Transaction ID : SB21B.6704**

Amount of Each Disbursement this Period

1117.91

Full Name (Last, First, Middle Initial)

**C. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Management Services

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  
09 / 01 / 2011
**Transaction ID : SB21B.6690**

Amount of Each Disbursement this Period

1509.36

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

3177.27

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Medical Ins

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  
09      02      2011
**Transaction ID : SB21B.6747**

Amount of Each Disbursement this Period

550.00

Full Name (Last, First, Middle Initial)

**B. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Medical Ins

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  
09      12      2011
**Transaction ID : SB21B.6774**

Amount of Each Disbursement this Period

550.00

Full Name (Last, First, Middle Initial)

**C. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Postage

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  
09      15      2011
**Transaction ID : SB21B.6750**

Amount of Each Disbursement this Period

880.00

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

1980.00

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Postage

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  
09 / 16 / 2011
**Transaction ID : SB21B.6749**

Amount of Each Disbursement this Period

440.00

Full Name (Last, First, Middle Initial)

**B. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Medical Ins

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  
09 / 16 / 2011
**Transaction ID : SB21B.6751**

Amount of Each Disbursement this Period

1100.00

Full Name (Last, First, Middle Initial)

**C. Randy Goodwin**

Mailing Address 13421 Malena Dr

City Santa Ana      State CA      Zip Code 92705

Purpose of Disbursement  
Management Services

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  
09 / 16 / 2011
**Transaction ID : SB21B.6756**

Amount of Each Disbursement this Period

1320.29

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

2860.29

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## REPUBLICAN MAJORITY CAMPAIGN

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

1320.29

MM / DD / YYYY

Category/  
Type

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

Category/  
Type

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

18103.02

**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 35 OF 55

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

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Healthplan Services**

Mailing Address 932 D St

City Ramona      State CA      Zip Code 92065

Purpose of Disbursement  
Medical Ins

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 / 07 / 2011
**Transaction ID : SB21B.6655**

Amount of Each Disbursement this Period

51.89

Full Name (Last, First, Middle Initial)

**B. Healthplan Services**

Mailing Address 932 D St

City Ramona      State CA      Zip Code 92065

Purpose of Disbursement  
Medical Ins

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 / 29 / 2011
**Transaction ID : SB21B.6693**

Amount of Each Disbursement this Period

51.89

Full Name (Last, First, Middle Initial)

**C. Healthplan Services**

Mailing Address 932 D St

City Ramona      State CA      Zip Code 92065

Purpose of Disbursement  
Medical Ins

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  
09 / 15 / 2011
**Transaction ID : SB21B.6764**

Amount of Each Disbursement this Period

50.21

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

153.99

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Highbeam.com**

Mailing Address 1122 Parkway Ave

City New York      State NY      Zip Code 10014

Purpose of Disbursement  
Research Service

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      08      2011
**Transaction ID : SB21B.6668**

Amount of Each Disbursement this Period

29.95

Full Name (Last, First, Middle Initial)

**B. Highbeam.com**

Mailing Address 1122 Parkway Ave

City New York      State NY      Zip Code 10014

Purpose of Disbursement  
Research Service

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      08      2011
**Transaction ID : SB21B.6716**

Amount of Each Disbursement this Period

29.95

Full Name (Last, First, Middle Initial)

**C. Highbeam.com**

Mailing Address 1122 Parkway Ave

City New York      State NY      Zip Code 10014

Purpose of Disbursement  
Research Service

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  
09      08      2011
**Transaction ID : SB21B.6734**

Amount of Each Disbursement this Period

29.95

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

89.85

**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 37 OF 55

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

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Kaiser Permanente**

Mailing Address 4647 Zion Ave

City San Diego      State CA      Zip Code 92120

Purpose of Disbursement  
Med Insurance

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      25      2011
**Transaction ID : SB21B.6644**

Amount of Each Disbursement this Period

176.25

Full Name (Last, First, Middle Initial)

**B. Kaiser Permanente**

Mailing Address 4647 Zion Ave

City San Diego      State CA      Zip Code 92120

Purpose of Disbursement  
Medical Ins

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      24      2011
**Transaction ID : SB21B.6707**

Amount of Each Disbursement this Period

176.25

Full Name (Last, First, Middle Initial)

**C. Kaiser Permanente**

Mailing Address 4647 Zion Ave

City San Diego      State CA      Zip Code 92120

Purpose of Disbursement  
Medical Ins

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      2011
**Transaction ID : SB21B.6762**

Amount of Each Disbursement this Period

176.25

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

528.75

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Gary Kreep**

Mailing Address 932 D Street

City Ramona State CA Zip Code 92065

Purpose of Disbursement  
Legal Services

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  
07 01 2011
**Transaction ID : SB21B.6656**

Amount of Each Disbursement this Period

1097.96

Full Name (Last, First, Middle Initial)

**B. Gary Kreep**

Mailing Address 932 D Street

City Ramona State CA Zip Code 92065

Purpose of Disbursement  
Legal Services

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  
07 19 2011
**Transaction ID : SB21B.6647**

Amount of Each Disbursement this Period

1097.95

Full Name (Last, First, Middle Initial)

**C. Gary Kreep**

Mailing Address 932 D Street

City Ramona State CA Zip Code 92065

Purpose of Disbursement  
Legal Services

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 01 2011
**Transaction ID : SB21B.6703**

Amount of Each Disbursement this Period

1097.96

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

3293.87

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

REPUBLICAN MAJORITY CAMPAIGN



950.00

State:  District:

08 / 16 / 2011

1097.95

State:  District:

950.00

State:  District:

2997.95

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

PAGE 40 OF 55

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Gary Kreep**

Mailing Address 932 D Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Ramona | CA    | 92065    |

Purpose of Disbursement  
Legal Services

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 01    |   | 2011        |

**Transaction ID : SB21B.6772**

Amount of Each Disbursement this Period

|         |
|---------|
| 1481.70 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Gary Kreep**

Mailing Address 932 D Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Ramona | CA    | 92065    |

Purpose of Disbursement  
Office Rental

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 12    |   | 2011        |

**Transaction ID : SB21B.6748**

Amount of Each Disbursement this Period

|        |
|--------|
| 950.00 |
|--------|

Full Name (Last, First, Middle Initial)

**C. Gary Kreep**

Mailing Address 932 D Street

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Ramona | CA    | 92065    |

Purpose of Disbursement  
Legal Services

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 15    |   | 2011        |

**Transaction ID : SB21B.6752**

Amount of Each Disbursement this Period

|         |
|---------|
| 1292.62 |
|---------|

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

3724.32

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## REPUBLICAN MAJORITY CAMPAIGN

### A. Landslide Communications

Date of Disbursement

Transaction ID : SB21B.6672

Amount of Each Disbursement this Period

2000.00

Category/  
Type

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

State:  District:

Full Name (Last, First, Middle Initial)

**B. Landslide Communications**

Date of Disbursement

08 / 12 / 2011

Mailing Address 3838 Raymert Dr, Ste 3

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Las Vegas | NV    | 89121    |

Transaction ID : SB21B.6718

| Purpose of Disbursement | Strategic Consultant |
|-------------------------|----------------------|
|                         |                      |

Amount of Each Disbursement this Period

2000.00

Candidate Name

Category/  
Type

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

**C. Landslide Communications**

Date of Disbursement

Mailing Address 3838 Raymert Dr. Ste 3

| City      | State | Zip Code |
|-----------|-------|----------|
| Las Vegas | NV    | 89121    |

Transaction ID : SB21B.6741

| Purpose of Disbursement | Strategic Consultant |
|-------------------------|----------------------|
|                         |                      |

Amount of Each Disbursement this Period

2000.00

Candidate Name

Category/  
Type

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

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

6000.00

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

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## REPUBLICAN MAJORITY CAMPAIGN



1500.00

Category/  
Type

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

MM / DD / YYYY  
08 / 26 / 2011

248.23

Category/  
Type

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

97.29

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

1845.52

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

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

REPUBLICAN MAJORITY CAMPAIGN

### A. Political Advertising

Category/  
Type

28008.16

State:  District:

## B. Political Advertising

MM / DD / YYYY  
07 / 11 / 2011

Category/  
Type

28345.47

State:  District:

### C. Political Advertising

Category/  
Type

34329.01

State:  District:

90682.64





|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## REPUBLICAN MAJORITY CAMPAIGN

Category/  
Type

24300.15

Category/  
Type

16093.04

Category/  
Type

21258.99

61652.18

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



|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## REPUBLICAN MAJORITY CAMPAIGN

### A. William Saracino

Category/  
Type

300.00

State:  District:

### B. William Saracino

MM / DD / YYYY

Category/  
Type

300.00

State:  District:

### C. James Sills

Category/  
Type

400.00

State:  District:

1000.00

**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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Donna Smith**

Mailing Address 932 D Street

City Ramona State CA Zip Code 92065

Purpose of Disbursement  
Clerical Services

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 / 01 / 2011
**Transaction ID : SB21B.6663**

Amount of Each Disbursement this Period

52.17

Full Name (Last, First, Middle Initial)

**B. Donna Smith**

Mailing Address 932 D Street

City Ramona State CA Zip Code 92065

Purpose of Disbursement  
Clerical Services

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 / 11 / 2011
**Transaction ID : SB21B.6652**

Amount of Each Disbursement this Period

52.16

Full Name (Last, First, Middle Initial)

**C. Donna Smith**

Mailing Address 932 D Street

City Ramona State CA Zip Code 92065

Purpose of Disbursement  
Clerical Services

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 / 2011
**Transaction ID : SB21B.6701**

Amount of Each Disbursement this Period

52.17

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

156.50

**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 50 OF 55

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

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NAME OF COMMITTEE (In Full)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Union Co.**

Mailing Address 17622 17th St

City Tustin      State CA      Zip Code 92780

Purpose of Disbursement  
Travel 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  
07 / 15 / 2011
**Transaction ID : SB21B.6676**

Amount of Each Disbursement this Period

70.70

Full Name (Last, First, Middle Initial)

**B. Union Co.**

Mailing Address 17622 17th St

City Tustin      State CA      Zip Code 92780

Purpose of Disbursement  
Travel 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  
07 / 28 / 2011
**Transaction ID : SB21B.6687**

Amount of Each Disbursement this Period

68.64

Full Name (Last, First, Middle Initial)

**C. Union Co.**

Mailing Address 17622 17th St

City Tustin      State CA      Zip Code 92780

Purpose of Disbursement  
Travel 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 / 18 / 2011
**Transaction ID : SB21B.6723**

Amount of Each Disbursement this Period

68.68

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

208.02

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <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 |

## REPUBLICAN MAJORITY CAMPAIGN

**A. Union Co.**

Mailing Address 17622 17th St

| City   | State | Zip Code |
|--------|-------|----------|
| Tustin | CA    | 92780    |

| Purpose of Disbursement |
|-------------------------|
| Travel Expense          |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |
| State:         | District:                |           |

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

Date of Disbursement

Transaction ID : SB21B.6738

Amount of Each Disbursement this Period

65.93

Full Name (Last, First, Middle Initial)

## B. United Printing and Mailing

Mailing Address 4833 S 38th St

| City    | State | Zip Code |
|---------|-------|----------|
| Phoenix | AZ    | 85040    |

### Purpose of Disbursement Printing

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) ▼ |                          |         |

Date of Disbursement

M M / D D / Y Y Y Y  
07 11 2011

Transaction ID : SB21B.6601

Amount of Each Disbursement this Period

304.94

Full Name (Last, First, Middle Initial)

### C. United Printing and Mailing

Mailing Address 4833 S 38th St

| City    | State | Zip Code |
|---------|-------|----------|
| Phoenix | AZ    | 85040    |

| Purpose of Disbursement | Printing |
|-------------------------|----------|
|                         |          |

Candidate Name

|                |                          |           |
|----------------|--------------------------|-----------|
| Office Sought: | <input type="checkbox"/> | House     |
|                | <input type="checkbox"/> | Senate    |
|                | <input type="checkbox"/> | President |
| State:         | District:                |           |

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

08 / 15 / 2011

Transaction ID : SB21B.6608

Amount of Each Disbursement this Period

2701.90

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

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

3072.77

**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 52 OF 55

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. United Printing and Mailing**

Mailing Address 4833 S 38th St

|         |       |          |
|---------|-------|----------|
| City    | State | Zip Code |
| Phoenix | AZ    | 85040    |

Purpose of Disbursement  
Printing

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 19    |   | 2011      |

**Transaction ID : SB21B.6617**

Amount of Each Disbursement this Period

|         |
|---------|
| 1189.74 |
|---------|

Full Name (Last, First, Middle Initial)

**B. Venetian Hotel**

Mailing Address 3355 Las Vegas Blvd

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Las Vegas | NV    | 89109    |

Purpose of Disbursement  
Hotel room

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 07    |   | 14    |   | 2011      |

**Transaction ID : SB21B.6670**

Amount of Each Disbursement this Period

|        |
|--------|
| 211.68 |
|--------|

Full Name (Last, First, Middle Initial)

**C. Verizon**

Mailing Address 272 E Via Rancho Parkway

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Escondido | CA    | 92025    |

Purpose of Disbursement  
Telephone

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |           |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 09    |   | 15    |   | 2011      |

**Transaction ID : SB21B.6754**

Amount of Each Disbursement this Period

|        |
|--------|
| 137.62 |
|--------|

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

|         |
|---------|
| 1539.04 |
|---------|

|  |
|--|
|  |
|--|

**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 53 OF 55

|                                         |                              |                              |                              |                             |                              |
|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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)

**REPUBLICAN MAJORITY CAMPAIGN**

Full Name (Last, First, Middle Initial)

**A. Verizon**

Mailing Address 272 E Via Rancho Parkway

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| Escondido | CA    | 92025    |

Purpose of Disbursement  
Telephone

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) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 21    | / | 2011        |

**Transaction ID : SB21B.6759**

Amount of Each Disbursement this Period

|        |
|--------|
| 201.22 |
|--------|

Full Name (Last, First, Middle Initial)

**B. Von's**

Mailing Address 17662 Seventeenth St

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| Tustin | CA    | 92780    |

Purpose of Disbursement  
Meeting Supplies

Candidate Name

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

State: District:

|                   |                                            |                                  |
|-------------------|--------------------------------------------|----------------------------------|
| Disbursement For: | <input type="checkbox"/> Primary           | <input type="checkbox"/> General |
|                   | <input type="checkbox"/> Other (specify) ▼ |                                  |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 19    | / | 2011        |

**Transaction ID : SB21B.6739**

Amount of Each Disbursement this Period

|        |
|--------|
| 206.99 |
|--------|

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

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

Purpose of Disbursement

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) ▼ |                                  |

Date of Disbursement

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

Amount of Each Disbursement this Period

|  |
|--|
|  |
|--|

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

|        |
|--------|
| 408.21 |
|--------|

|           |
|-----------|
| 433959.67 |
|-----------|

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 54 OF 55

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

REPUBLICAN MAJORITY CAMPAIGN

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Landslide Communications

Nature of Debt (Purpose):

Telephone Calls

Mailing Address 3838 Rymert Dr, Ste 3

City State

Zip Code

Las Vegas

NV

89121

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6801

Amount Incurred This Period

2250.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Response Enterprises

Nature of Debt (Purpose):

Credit Card Processing

Mailing Address 284 Shalom Rd

City State

Zip Code

Waynesboro

VA

22980

Outstanding Balance Beginning This Period

3620.05

Transaction ID : SD10.5563

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3620.05

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Response Enterprises

Nature of Debt (Purpose):

Credit Card Processing

Mailing Address 284 Shalom Rd

City

State

Zip Code

Waynesboro

VA

22980

Outstanding Balance Beginning This Period

1094.10

Transaction ID : SD10.5564

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1094.10

1) SUBTOTALS This Period This Page (optional)..... ►

6964.15

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

6964.15

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

6964.15

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 55 OF 55  
FOR LINE 24 OF FORM 3X

|                                                                                                                                                                                                                                                                                                                                                             |                              |                                                                                                                                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| NAME OF COMMITTEE (In Full)<br><b>REPUBLICAN MAJORITY CAMPAIGN</b>                                                                                                                                                                                                                                                                                          |                              | FEC IDENTIFICATION NUMBER ▼<br><b>C</b> C00442319                                                                                                                      |  |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on                                                                                                                                                                                |                              | M M M / D D D / Y Y Y Y Y Y                                                                                                                                            |  |
| Full Name (Last, First, Middle Initial) of Payee<br><b>Landslide Communications</b>                                                                                                                                                                                                                                                                         |                              | Date<br>M M M / D D D / Y Y Y Y Y Y<br><b>09 / 12 / 2011</b>                                                                                                           |  |
| Mailing Address 3838 Raymert Dr, Ste 3                                                                                                                                                                                                                                                                                                                      |                              | Amount<br><b>2250.00</b>                                                                                                                                               |  |
| City State Zip Code<br>Las Vegas NV 89121                                                                                                                                                                                                                                                                                                                   |                              | Transaction ID : <b>SE.6802</b>                                                                                                                                        |  |
| Purpose of Expenditure<br>Telephone calls                                                                                                                                                                                                                                                                                                                   | Category/<br>Type <b>004</b> | Office Sought: <input checked="" type="checkbox"/> House State: <b>NY</b><br><input type="checkbox"/> Senate District: <b>09</b><br><input type="checkbox"/> President |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:<br><b>ROBERT L TURNER</b>                                                                                                                                                                                                                                                                    |                              | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                 |  |
| Calendar Year-To-Date Per Election for Office Sought <b>2250.00</b>                                                                                                                                                                                                                                                                                         |                              | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br>2011 <input checked="" type="checkbox"/> Other (specify) <b>Runoff</b>          |  |
| Full Name (Last, First, Middle Initial) of Payee                                                                                                                                                                                                                                                                                                            |                              | Date                                                                                                                                                                   |  |
| Mailing Address                                                                                                                                                                                                                                                                                                                                             |                              | M M M / D D D / Y Y Y Y Y Y                                                                                                                                            |  |
| City State Zip Code                                                                                                                                                                                                                                                                                                                                         |                              | Amount                                                                                                                                                                 |  |
| Purpose of Expenditure                                                                                                                                                                                                                                                                                                                                      |                              | Office Sought: <input type="checkbox"/> House State:<br><input type="checkbox"/> Senate District:<br><input type="checkbox"/> President                                |  |
| Category/<br>Type                                                                                                                                                                                                                                                                                                                                           |                              | Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose                                                                                            |  |
| Name of Federal Candidate Supported or Opposed by Expenditure:                                                                                                                                                                                                                                                                                              |                              | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) <b>Runoff</b>                          |  |
| Calendar Year-To-Date Per Election for Office Sought                                                                                                                                                                                                                                                                                                        |                              | M M M / D D D / Y Y Y Y Y Y                                                                                                                                            |  |
| (a) SUBTOTAL of Itemized Independent Expenditures.....                                                                                                                                                                                                                                                                                                      |                              | <b>2250.00</b>                                                                                                                                                         |  |
| (b) SUBTOTAL of Unitemized Independent Expenditures .....                                                                                                                                                                                                                                                                                                   |                              |                                                                                                                                                                        |  |
| (c) TOTAL Independent Expenditures.....                                                                                                                                                                                                                                                                                                                     |                              | <b>2250.00</b>                                                                                                                                                         |  |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. |                              |                                                                                                                                                                        |  |
| Signature <u>Randy Goodwin</u>                                                                                                                                                                                                                                                                                                                              |                              | Date M M M / D D D / Y Y Y Y Y Y<br><b>10 / 15 / 2011</b>                                                                                                              |  |
|                                                                                                                                                                                                                                                                                                                                                             |                              | [Electronically Filed]                                                                                                                                                 |  |