

**REPORT OF RECEIPTS AND DISBURSEMENTS
FOR A COMMITTEE OR ORGANIZATION
SUPPORTING A NOMINATING CONVENTION
(Summary Page)**

1. (a) Name of Committee (in full) COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION	2. FEC Identification Number C00485110
(b) Address (Number and Street) 310 FIRST STREET SE	3. Type of Committee/Organization: <input checked="" type="checkbox"/> Convention Committee <input type="checkbox"/> Host Committee <input type="checkbox"/> Other _____ (specify)
(c) City, State and ZIP Code WASHINGTON DC 20003	

4. TYPE OF REPORT (Check appropriate box(es)):

(a) POST CONVENTION REPORT QUARTERLY REPORT (check one) April 15 July 15 October 15 January 31 FINAL REPORT(b) Is this an Amendment? YES NO**SUMMARY OF RECEIPTS AND DISBURSEMENTS**

5. Covering Period FROM: 07/01/2014 THROUGH: 09/30/2014

SECTION A — CASH BALANCE SUMMARY	Column A This Period	Column B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2014		738983.85
(b) Cash on Hand at Beginning of Reporting Period	700552.55	
(c) Total Receipts (From Line 20)	3846.08	4041.09
(d) Subtotal (Add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	704398.63	743024.94
7. Total Disbursements (From Line 25)	704398.63	743024.94
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	0.00	0.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C or Schedule D)	0.00	
SECTION B — SUMMARY OF EXPENDITURES SUBJECT TO LIMITATIONS		
11. Convention Expenditures (From Line 21(c))	704398.63	743024.94
12. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (From Line 17(c))	3846.08	4041.09
(a) Expenditures Subject to Limitation (Subtract Line 12 from Line 11)	700552.55	738983.85
(b) Expenditures from Prior Years Subject to Limitation	17509316.15	17509316.15
(c) Total Expenditures Subject to Limitation (Add Lines 12(a) and 12(b))		18248300.00

I certify that I have examined this report, and to the best of my knowledge and belief it is true, correct and complete.

Anthony Parker

[Electronically Filed]

10/06/2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

For Further Federal Election Commission
Information Toll Free 800/424-9530
Contact: Local 202/694-1100

FE1AN056

FEC FORM 4 (Revised 1/2001)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
(Page 2 of FEC Form 4)**

Name of Committee (in Full) COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION	Report Covering the Period: FROM: 07/01/2014 TO: 09/30/2014	
RECEIPTS	Column A This Period	Column B Calendar Year-to-Date
	13. Federal Funds (Itemize all on Schedule A)	0.00
14. Contributions to Defray Convention Expenses:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Contributions to Defray Convention Expenses (Add Lines 14(a) and 14(b))	0.00	0.00
15. Transfers from Affiliated Committees	0.00	0.00
16. Loans and Loan Repayments Received (Add Lines 16(a) and 16(b))		
(a) Loans Received	0.00	
(b) Loan Repayments Received	0.00	
(c) Subtotal of Loans and Loan Repayments Received (Add Lines 14a and 14b)	0.00	0.00
17. Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures:		
(a) Itemized (Use Schedule A)	3846.08	
(b) Unitemized	0.00	
(c) Subtotal of Refunds, Rebates, Returns of Deposits Relating to Convention Expenditures (Add Lines 17(a) and 17(b))	3846.08	4041.09
18. Other Refunds, Rebates, Returns of Deposits:		
(a) Itemized Other Refunds, Rebates, Returns of Deposits	0.00	
(b) Unitemized Other Refunds, Rebates, Returns of Deposits	0.00	
(c) Subtotal of Other Refunds, Rebates, Returns of Deposits (Add Lines 18(a) and 18(b))	0.00	0.00
19. Other Income:		
(a) Itemized (Use Schedule A)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Other Income (Add Lines 19(a) and 19(b))	0.00	0.00
20. TOTAL RECEIPTS (Add Lines 13, 14(c), 15, 16(c), 17(c), 18(c) and 19(c))	3846.08	4041.09
DISBURSEMENTS		
21. Convention Expenditures:		
(a) Itemized (Use Schedule B)	704388.63	
(b) Unitemized	10.00	
(c) Subtotal of Convention Expenditures (Add Lines 21(a) and 21(b))	704398.63	743024.94
22. Transfers to Affiliated Committees	0.00	0.00
23. Loans and Loan Repayments Made:		
(a) Loans Made	0.00	
(b) Loan Repayments Made	0.00	
(c) Subtotal of Loans and Loan Repayments Made (Add Lines 23(a) and 23(b))	0.00	0.00
24. Other Disbursements:		
(a) Itemized (Use Schedule B)	0.00	
(b) Unitemized	0.00	
(c) Subtotal of Other Disbursements (Add Lines 24(a) and 24(b))	0.00	0.00
25. TOTAL DISBURSEMENTS (Add Lines 21(c), 22, 23(c) and 24(c))	704398.63	743024.94

**SCHEDULE A (FEC Form 4)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 3 OF 10
<input type="checkbox"/> 13	<input type="checkbox"/> 14a	<input type="checkbox"/> 15	<input type="checkbox"/> 16a
<input type="checkbox"/> 16b	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 18a	<input type="checkbox"/> 19a

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

NAME OF COMMITTEE (In Full)
COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION

Full Name (Last, First, Middle Initial) A. Residence Inn by Marriott Downtown		Date of Receipt 08 / 29 / 2014
Mailing Address 101 E Tyler Street		Transaction ID : SA17A.8950
City Tampa	State FL	Zip Code 33602
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 3846.08
Name of Employer	Occupation	Vendor Refund
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3846.08	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional)	▶	3846.08
TOTAL This Period (last page this line number only)	▶	3846.08

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA17A

Transaction ID : SA17A.8950

This refund was determined to be the result of incorrect room rates charged by the hotel. The refund amount was reduced by \$336 after the parties determined that some of the room rates initially identified were indeed correct according to the underlying contract.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 4)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

21a 22 23a 23b 24a

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NAME OF COMMITTEE (In Full)

COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION

Full Name (Last, First, Middle Initial)

A. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353

Purpose of Disbursement Data Plan

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2014

Amount of Each Disbursement this Period

31.27

Transaction ID : SB21A.8934

Category/Type

B. Automatic Data Processing

Mailing Address PO Box 9001006

City Louisville State KY Zip Code 40290

Purpose of Disbursement Payroll Service Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 01 / 2014

Amount of Each Disbursement this Period

116.33

Transaction ID : SB21A.8931

Category/Type

C. BB&T Financial, FSB

Mailing Address PO Box 580340

City Charlotte State NC Zip Code 28258

Purpose of Disbursement Credit Card Payment - See Memos

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Amount of Each Disbursement this Period

67.27

Transaction ID : SB21A.8937

Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

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

214.87

**SCHEDULE B (FEC Form 4)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

21a 22 23a 23b 24a

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NAME OF COMMITTEE (In Full)

COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION

Full Name (Last, First, Middle Initial)

A. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353

Purpose of Disbursement
Data Plan

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 04 / 2014

Amount of Each Disbursement this Period

31.27

Transaction ID : SB21A.8937.0
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. BB&T Financial, FSB

Mailing Address PO Box 580340

City Charlotte State NC Zip Code 28258

Purpose of Disbursement
Credit Card Payment - See Memos

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2014

Amount of Each Disbursement this Period

31.27

Transaction ID : SB21A.8938

Full Name (Last, First, Middle Initial)

C. AT&T Mobility

Mailing Address PO Box 536216

City Atlanta State GA Zip Code 30353

Purpose of Disbursement
Data Plan

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 29 / 2014

Amount of Each Disbursement this Period

31.27

Transaction ID : SB21A.8938.0
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

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

31.27

**SCHEDULE B (FEC Form 4)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

21a 22 23a 23b 24a

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NAME OF COMMITTEE (In Full)

COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION

Full Name (Last, First, Middle Initial)

A. Law Offices of Heather Sidwell Morris, P.A.

Mailing Address PO Box 173207

City Tampa State FL Zip Code 33672

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2014

Amount of Each Disbursement this Period

4462.50

Transaction ID : SB21A.8926

Category/
Type

B. Law Offices of Heather Sidwell Morris, P.A.

Mailing Address PO Box 173207

City Tampa State FL Zip Code 33672

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Amount of Each Disbursement this Period

787.50

Transaction ID : SB21A.8932

Category/
Type

C. Law Offices of Heather Sidwell Morris, P.A.

Mailing Address PO Box 173207

City Tampa State FL Zip Code 33672

Purpose of Disbursement
Legal and Compliance Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Amount of Each Disbursement this Period

2012.50

Transaction ID : SB21A.8935

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

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

7262.50

**SCHEDULE B (FEC Form 4)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

21a 22 23a 23b 24a

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NAME OF COMMITTEE (In Full)

COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION

Full Name (Last, First, Middle Initial)

A. MAXimum Compliance, LLC

Mailing Address 4703 Woodway Lane, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Bookkeeping & Compliance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 13 / 2014

Amount of Each Disbursement this Period

650.44

Transaction ID : SB21A.8927

Category/
Type

B. MAXimum Compliance, LLC

Mailing Address 4703 Woodway Lane, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Bookkeeping & Compliance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 05 / 2014

Amount of Each Disbursement this Period

450.43

Transaction ID : SB21A.8933

Category/
Type

C. MAXimum Compliance, LLC

Mailing Address 4703 Woodway Lane, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Bookkeeping & Compliance

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 04 / 2014

Amount of Each Disbursement this Period

1450.84

Transaction ID : SB21A.8936

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

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

2551.71

SCHEDULE B (FEC Form 4) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

21a 22 23a 23b 24a

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NAME OF COMMITTEE (In Full)

COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION

Full Name (Last, First, Middle Initial)

A. U.S. Treasury

Mailing Address 3700 East-West Highway
PGMC II, Room 6D24

City Hyattsville State MD Zip Code 20782

Purpose of Disbursement
Repayment of Convention Funds

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 23 2014

Amount of Each Disbursement this Period

694328.28

Transaction ID : SB21A.8952

Category/
Type

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

Category/
Type

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

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

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

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

694328.28

704388.63

SCHEDULE D (FEC Form 4)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 10
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
COMMITTEE ON ARRANGEMENTS FOR THE 2012 REPUBLICAN NATIONAL CONVENTION

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Residence Inn by Marriott Downtown	Nature of Debt (Purpose): Vendor Refund
Mailing Address 101 E Tyler Street	
City State Zip Code Tampa FL 33602	

Outstanding Balance Beginning This Period 4182.08	Transaction ID : SD9.8759	
Amount Incurred This Period -336.00	Payment This Period 3846.08	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	