



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**Republican Majority Fund**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value="53141.93"/>	<input type="text" value="53141.93"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="249664.87"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="287262.23"/>	<input type="text" value="762358.12"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="536927.10"/>	<input type="text" value="815500.05"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="339325.00"/>	<input type="text" value="617897.95"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="197602.10"/>	<input type="text" value="197602.10"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Republican Majority Fund**

Report Covering the Period: From:  /  /  To:  /  /

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).....	9750.00	59100.00
(ii) Unitemized .....	29289.34	58270.34
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	39039.34	117370.34
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	81000.00	120000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	120039.34	237370.34
12. Transfers From Affiliated/Other Party Committees.....	167222.89	524987.78
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	287262.23	762358.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	287262.23	762358.12

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	215325.00	380834.42
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	215325.00	380834.42
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	123000.00	236063.53
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	1000.00	1000.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	339325.00	617897.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	339325.00	617897.95

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	120039.34	237370.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	120039.34	237370.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	215325.00	380834.42
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	215325.00	380834.42

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 80
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. BRAUCH, PAUL, A., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 238 10TH AVE SE

City LE MARS	State IA	Zip Code 51031-1742
-----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2019

**Transaction ID : SA11A.143249**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B. TUTTLE, JOHN, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3070 FALMOUTH DR

City CHESAPEAKE	State VA	Zip Code 23321-5755
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TOTAL BUSINESS SOLUTIONS, INC.	Occupation (for Individual) SALES
---	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2019

**Transaction ID : SA11A.143219**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C. ANDERSON, DANA, K., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 947 NEW HAMPSHIRE ST STE 203

City LAWRENCE	State KS	Zip Code 66044-3074
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) MACERICH	Occupation (for Individual) REAL ESTATE INVESTMENT TRUSTS
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 05 / 2019

**Transaction ID : SA11A.143490**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 80
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. EDGAR, TOMMY, L., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 18172 E 810 RD  
City KINGFISHER State OK Zip Code 73750-7834  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2019  
**Transaction ID : SA11A.143523**  
Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. FLEENOR, MARGARET, L., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3517 LENOX RD  
City BIRMINGHAM State AL Zip Code 35213-2843  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2019  
**Transaction ID : SA11A.143488**  
Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C. HUNT, KENNETH, C., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 1302  
City DILLON State MT Zip Code 59725-1302  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 05 / 2019  
**Transaction ID : SA11A.143445**  
Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 80
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. ROSEMAN, C., E., , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 2128

City HICKORY	State NC	Zip Code 28603-2128
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) C.R. LAINE	Occupation (for Individual) CEO
---	------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 05 / 2019

**Transaction ID : SA11A.143439**

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

**B. BEREN, ROBERT, M., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13840 LE MANS WAY

City PALM BEACH GARDENS	State FL	Zip Code 33410-1266
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) LE BEREN INVESTMENT CO.	Occupation (for Individual) 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 Y  
 08 / 06 / 2019

**Transaction ID : SA11A.143603**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C. BUNBURY, BARBARA, K., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 KRAUSE ST

City ROCKFORD	State MI	Zip Code 49341-1214
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 06 / 2019

**Transaction ID : SA11A.143632**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 80
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. BURKE, ERWIN, L., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5500 WILLIAMSBURG LANDING DR  
APT 260

City WILLIAMSBURG State VA Zip Code 23185-8082

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2019

**Transaction ID : SA11A.143644**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**B. ARKES, HAL, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1292 HIGHLAND ST

City COLUMBUS State OH Zip Code 43201-3207

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2019

**Transaction ID : SA11A.143884**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C. TROTH, ROBERT, S., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3003 GULF SHORE BLVD N APT 301

City NAPLES State FL Zip Code 34103-3912

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2019

**Transaction ID : SA11A.143870**

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 80
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. BELLES, THOMAS, A., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 803 JACKSON ST  
 City FALLS CHURCH State VA Zip Code 22046-2834  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROCK CREEK PARTNERS Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 13 / 2019  
**Transaction ID : SA11A.144357**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**CONTRIBUTION**

**B. KARMANOS, PETER, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4740 DOW RIDGE RD  
 City ORCHARD LAKE State MI Zip Code 48324-2327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAROLINA HURRICANES Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 13 / 2019  
**Transaction ID : SA11A.144379**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. BOKOR, JAMES, N., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 436 SUNSHINE BLVD  
 City TAVERNIER State FL Zip Code 33070-2434  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 19 / 2019  
**Transaction ID : SA11A.144598**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 OF 80
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. TOMAI, DANIEL, E., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 OCEANIC AVE

City STATEN ISLAND	State NY	Zip Code 10312-6513
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SIGNATURE CONSTRUCTION GROUP	Occupation (for Individual) CONSTRUCTION
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
08 / 19 / 2019  
**Transaction ID : SA11A.144633**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B. OSTNER, JOHN, L., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 304 N RIDGE RD

City LITTLE ROCK	State AR	Zip Code 72207-2522
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) NY LIFE	Occupation (for Individual) INSURANCE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
08 / 20 / 2019  
**Transaction ID : SA11A.144864**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**C. HELM, GLORA, , MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2917 FERNDAL ST

City HOUSTON	State TX	Zip Code 77098-1117
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
08 / 21 / 2019  
**Transaction ID : SA11A.144881**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 80
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. MORRILL, FREDDIE, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 319 BAYVIEW DR

City CITY BY THE SEA	State TX	Zip Code 78336-6715
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		21		2019

**Transaction ID : SA11A.144883**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B. GEARHART, MARILYN, V., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 817 BRIARWOOD DR

City EAST WENATCHEE	State WA	Zip Code 98802-8302
------------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2019

**Transaction ID : SA11A.144963**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C. STOVER, HAYES, C., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 409 WOODLAND ROAD

City SEWICKLEY	State PA	Zip Code 15143-1050
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) GATES	Occupation (for Individual) ATTORNEY
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2019

**Transaction ID : SA11A.144946**

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. ZIEGLER, A. EARL, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 25402  
 City DALLAS State TX Zip Code 75225-1402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 03 / 2019  
**Transaction ID : SA11A.145830**  
 Amount of Each Receipt this Period 300.00  
 Memo Item CONTRIBUTION

**B. LUKEMAN, YANA, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 853 7TH STREET  
 City NEW YORK State NY Zip Code 10019-5215  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 05 / 2019  
**Transaction ID : SA11A.145712**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**C. JOHNSON, JAMES, A., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 46 STILLFOREST ST  
 City HOUSTON State TX Zip Code 77024-7518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 17 / 2019  
**Transaction ID : SA11A.151536**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 14 OF 80  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. WILEY REIN LLP**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1776 K STREET NW

City WASHINGTON	State DC	Zip Code 20006-2304
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

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
12	/	31	/	2019

**Transaction ID : SA11A.159469**

Amount of Each Receipt this Period  
400.00

Memo Item  
**CONTRIBUTION**

**PARTNERS DO NOT EXCEED ITEMIZATION THRESHOLD**

**B.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

**C.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address

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

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	9750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 15 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. HONEYWELL INTERNATIONAL PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CONSTITUTION AVE. NW STE. 500W

City WASHINGTON	State DC	Zip Code 20001-2177
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 16 / 2019

**Transaction ID : SA11C.140863**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**B. AMERICAN BANKERS ASSOCIATION PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1120 CONNECTICUT AVENUE NW  
SUITE 600

City WASHINGTON	State DC	Zip Code 20036-3971
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 02 / 2019

**Transaction ID : SA11C.143136**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. UPSPAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 55 GLENLAKE PKWY NE

City ATLANTA	State GA	Zip Code 30328-3474
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
09 / 06 / 2019

**Transaction ID : SA11C.145945**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. HONEYWELL INTERNATIONAL PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 101 CONSTITUTION AVE. NW STE. 500W

City WASHINGTON	State DC	Zip Code 20001-2177
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	24	/	2019

**Transaction ID : SA11C.148475**

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**B. AMERICAN DENTAL ASSOCIATION POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1111 14TH STREET, NW  
SUITE 1100

City WASHINGTON	State DC	Zip Code 20005-5627
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	26	/	2019

**Transaction ID : SA11C.148939**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. BURGER KING FRANCHISEE PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 BARRETT LAKES BLVD. NW  
SUITE 180

City KENNESAW	State GA	Zip Code 30144-4561
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00329425

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2019

**Transaction ID : SA11C.149712**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. EXPERIAN NORTH AMERICA, INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 475 ANTON BLVD.

City COSTA MESA	State CA	Zip Code 92626-7037
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00379768

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2019

**Transaction ID : SA11C.149714**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 430 N. MICHIGAN AVE.

City CHICAGO	State IL	Zip Code 60611-4011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2019

**Transaction ID : SA11C.149713**

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**C. LIBERTY MUTUAL INSURANCE COMPANY PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 175 BERKELEY STREET

City BOSTON	State MA	Zip Code 02116-5066
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00171843

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2019

**Transaction ID : SA11C.150434**

Amount of Each Receipt this Period  
1500.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. LOCKHEED MARTIN CORPORATION EMPLOYEES' PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2121 CRYSTAL DRIVE  
SUITE 100

City ARLINGTON State VA Zip Code 22202-3706

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 15 / 2019

**Transaction ID : SA11C.151277**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. FIRST COMMAND PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4100 S. HULEN STREET

City FORT WORTH State TX Zip Code 76109-5051

FEC ID number of contributing federal political committee. **C** C00325647

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
11 / 25 / 2019

**Transaction ID : SA11C.155321**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. INDEPENDENT COMMUNITY BANKERS PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1615 L STREET NW STE. 900

City WASHINGTON State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  
12 / 18 / 2019

**Transaction ID : SA11C.157559**

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 19 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. MICROSOFT CORPORATION PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 16011 NE 36TH WAY

City REDMOND	State WA	Zip Code 98052-6301
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2019

**Transaction ID : SA11C.157562**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**B. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 430 N. MICHIGAN AVE.

City CHICAGO	State IL	Zip Code 60611-4011
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2019

**Transaction ID : SA11C.157563**

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

**C. THE CAPITAL GROUP COMPANIES INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 333 S. HOPE ST

City LOS ANGELES	State CA	Zip Code 90071-1406
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00540518

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2019

**Transaction ID : SA11C.157560**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. USAA EMPLOYEE PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 9800 FREDERICKSBURG RD.  
City SAN ANTONIO State TX Zip Code 78288-0001  
FEC ID number of contributing federal political committee. **C** C00164145  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 18 / 2019  
**Transaction ID : SA11C.157561**  
Amount of Each Receipt this Period  
2500.00  
 Memo Item  
CONTRIBUTION

**B. AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS PAC (AICP)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PALLADIAN CORPORATE CENTER I  
220 LEIGH FARM ROAD  
City DURHAM State NC Zip Code 27707-8110  
FEC ID number of contributing federal political committee. **C** C00077321  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2019  
**Transaction ID : SA11C.159567**  
Amount of Each Receipt this Period  
2500.00  
 Memo Item  
CONTRIBUTION

**C. COVINGTON & BURLING LLP PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 850 TENTH ST NW  
ONE CITY CENTER  
City WASHINGTON State DC Zip Code 20001-4956  
FEC ID number of contributing federal political committee. **C** C00462630  
Name of Employer (for Individual) Occupation (for Individual)  
Receipt For:  Primary  General  Other (specify)  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2019  
**Transaction ID : SA11C.159562**  
Amount of Each Receipt this Period  
5000.00  
 Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 21 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. FMR, LLC PAC - FEDERAL**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 82 DEVONSHIRE STREET #N5A

City BOSTON	State MA	Zip Code 02109-3605
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00380550

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA11C.159468**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. HOME DEPOT INC. POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1155 F STREET NW  
SUITE 400

City WASHINGTON	State DC	Zip Code 20004-1346
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA11C.159565**

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**C. KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4111 E 37TH ST N

City WICHITA	State KS	Zip Code 67220-3203
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00236489

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA11C.159563**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	12500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. NATIONAL MULTIFAMILY HOUSING COUNCIL PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1775 EYE ST. NW  
SUITE 1100

City WASHINGTON State DC Zip Code 20006-2424

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 31 / 2019  
**Transaction ID : SA11C.159568**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B. NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 51 MADISON AVENUE  
ROOM 1109

City NEW YORK State NY Zip Code 10010-1603

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 31 / 2019  
**Transaction ID : SA11C.159566**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 700 13TH STREET NW STE. 350

City WASHINGTON State DC Zip Code 20005-6621

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
12 / 31 / 2019  
**Transaction ID : SA11C.159564**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	81000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. COTTON VICTORY**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 N WASHINGTON ST  
SUITE 700

City ALEXANDRIA State VA Zip Code 22314-5509

FEC ID number of contributing federal political committee. **C** C00571018

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
524987.78

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2019

**Transaction ID : SA12.149402**

Amount of Each Receipt this Period  
111249.34

Memo Item  
TRANSFER

**B. AGATSTON, SARI, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1633 NORTH VIEW DRIVE

City MIAMI BEACH State FL Zip Code 33140-4251

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

Name of Employer (for Individual) Occupation (for Individual)  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
945.34

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2019

**Transaction ID : SA.138986.1.Q319**

Amount of Each Receipt this Period  
945.34

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. ALLISON, JENNIFER, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1089

City CONWAY State AR Zip Code 72033-1089

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

Name of Employer (for Individual) Occupation (for Individual)  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2019

**Transaction ID : SA.148700.1.Q319**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	111249.34
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. ALLISON, JOHN, W., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1089

City CONWAY	State AR	Zip Code 72033-1089
----------------	-------------	------------------------

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

Name of Employer (for Individual) HOME BANKSHARES, INC.	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2019

**Transaction ID : SA.148699.1.Q319**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. BARTFELD, DAN, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 338 WEST 84TH STREET

City NEW YORK	State NY	Zip Code 10024-4259
------------------	-------------	------------------------

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

Name of Employer (for Individual) MILBANK	Occupation (for Individual) ATTORNEY
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	18	/	2019

**Transaction ID : SA.145284.1.Q319**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. BRENNAN, KATIE, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1220 PARK AVENUE #5D

City NEW YORK	State NY	Zip Code 10128-1733
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	23	/	2019

**Transaction ID : SA.141222.1.Q319**

Amount of Each Receipt this Period  
4200.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. BROOKS, BOB, O., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5 TALMONT PLACE  
 City LITTLE ROCK State AR Zip Code 72223-9054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CAPITOL COUNSEL, LLC Occupation (for Individual) PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 19 / 2019  
**Transaction ID : SA.144569.1.Q319**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. FORD, JO ELLEN, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2500 N JACKSON ST  
 City LITTLE ROCK State AR Zip Code 72207-3718  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 02 / 2019  
**Transaction ID : SA.136910.1.Q319**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. FREEMAN, JERRY, W., MR., JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3940 GLENWICK  
 City DALLAS State TX Zip Code 75205-1238  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) AUTO DEALER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 07 / 2019  
**Transaction ID : SA.143751.1.Q319**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 26 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. FRIESS, FOSTER, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 9790

City JACKSON	State WY	Zip Code 83002-9790
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) INVESTOR
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2019

**Transaction ID : SA.145339.1.Q319**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. GANTZ, JOE, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5231 HIGHWAY 43 NORTH

City GREENVILLE	State NC	Zip Code 27834-6158
--------------------	-------------	------------------------

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

Name of Employer (for Individual) SELF EMPLOYED	Occupation (for Individual) FINANCE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2019

**Transaction ID : SA.145720.1.Q319**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. GLEASON, GEORGE, G., MR., II**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 8811

City LITTLE ROCK	State AR	Zip Code 72231-8811
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BANK OF THE OZARKS	Occupation (for Individual) CHAIRMAN/C.E.O.
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2019

**Transaction ID : SA.145410.1.Q319**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 27 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. GLEASON, LINDA, D., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 8811

City LITTLE ROCK	State AR	Zip Code 72231-8811
---------------------	-------------	------------------------

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

Name of Employer (for Individual) BANK OF THE OZARKS	Occupation (for Individual) DIRECTOR
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2019

**Transaction ID : SA.145403.1.Q319**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. GROSS, MARTIN, J., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 SANDLEWOOD DRIVE

City LIVINGSTON	State NJ	Zip Code 07039-
--------------------	-------------	--------------------

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

Name of Employer (for Individual) SANDLEWOOD SECURITIES, INC.	Occupation (for Individual) INVESTMENT MANAGER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3580.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	01	/	2019

**Transaction ID : SA.127774.1.Q319**

Amount of Each Receipt this Period  
2700.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. HANNA, FRANK, J., MR., III**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5 CONCOURSE PARKWAY STE. 200

City ATLANTA	State GA	Zip Code 30328-6157
-----------------	-------------	------------------------

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

Name of Employer (for Individual) HANNA CAPITAL, LLC	Occupation (for Individual) INVESTOR
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
4800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	09	/	2019

**Transaction ID : SA.144059.1.Q319**

Amount of Each Receipt this Period  
4800.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 28 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. HUBBARD, SONJA, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2806 STONEGATE DR

City TEXARKANA	State TX	Zip Code 75503-5414
-------------------	-------------	------------------------

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

Name of Employer (for Individual) E-Z MART	Occupation (for Individual) EXECUTIVE
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4400.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2019

**Transaction ID : SA.138491.1.Q319**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. KEPNER, SCOTT, D., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 940 EMMETT AVE STE 200

City BELMONT	State CA	Zip Code 94002-3864
-----------------	-------------	------------------------

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

Name of Employer (for Individual) VILLAGE OPERATING CO.	Occupation (for Individual) PARTNER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2019

**Transaction ID : SA.138479.1.Q319**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. KINSLOW, HENRY, C., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 140 WOODLAND DRIVE

City EL DORADO	State AR	Zip Code 71730-3126
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) ATTORNEY
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
MM / DD / YYYY  
09 / 17 / 2019

**Transaction ID : SA.146770.1.Q319**

Amount of Each Receipt this Period  
600.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 29 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. Knapple, Whitfield, L., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4703 CRESTWOOD DRIVE  
City LITTLE ROCK State AR Zip Code 72207-5435  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) GASTROENTEROLOGIST  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 08 / 12 / 2019  
Transaction ID : SA.144149.1.Q319  
Amount of Each Receipt this Period 2600.00  
 Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. Knapple, Whitfield, L., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 4703 CRESTWOOD DRIVE  
City LITTLE ROCK State AR Zip Code 72207-5435  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) GASTROENTEROLOGIST  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 5000.00

Date of Receipt 08 / 29 / 2019  
Transaction ID : SA.145405.1.Q319  
Amount of Each Receipt this Period 2400.00  
 Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. Laughery, Helen, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 503 EVERGREEN RD  
City ROCKY MOUNT State NC Zip Code 27803-2306  
FEC ID number of contributing federal political committee. **C**  
Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTMENTS  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 4400.00

Date of Receipt 07 / 16 / 2019  
Transaction ID : SA.140862.1.Q319  
Amount of Each Receipt this Period 4400.00  
 Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... 0.00  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. LAWTON, PETER, K., MR. ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 1056  
 City JACKSON State WY Zip Code 83001-1056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BANK OF JACKSON HOLE Occupation (for Individual) BANKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4400.00

Date of Receipt 08 / 15 / 2019  
**Transaction ID : SA.144441.1.Q319**  
 Amount of Each Receipt this Period 4400.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. LEACH, HOWARD, H., AMB. ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 350 ROYAL PALM WAY SUITE 401  
 City PALM BEACH State FL Zip Code 33480-4308  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PRIVATE INVESTMENTS  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 365.62

Date of Receipt 02 / 20 / 2019  
**Transaction ID : SA.138985.1.Q319**  
 Amount of Each Receipt this Period 365.62  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. LEDWELL, STEVE, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3300 WACO STREET  
 City TEXARKANA State TX Zip Code 75501-6645  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LEDWELL AND SON Occupation (for Individual) OWNER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4400.00

Date of Receipt 06 / 28 / 2019  
**Transaction ID : SA.138160.1.Q319**  
 Amount of Each Receipt this Period 4400.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. MARSHALL, MICHAEL, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3395 TUCKER RANCH ROAD  
 City WILSON State WY Zip Code 83014-9604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4400.00

Date of Receipt 08 / 15 / 2019  
**Transaction ID : SA.144443.1.Q319**  
 Amount of Each Receipt this Period 4400.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. MARTINEZ, ROMAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 W MELROSE ST  
 City CHEVY CHASE State MD Zip Code 20815-4244  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LATHAM & WATKINS LLP Occupation (for Individual) ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 09 / 2019  
**Transaction ID : SA.143727.1.Q319**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. MURPHY, R., MADISON, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 200 N. JEFFERSON STREET SUITE 400  
 City EL DORADO State AR Zip Code 71730-5854  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 4800.00

Date of Receipt 09 / 17 / 2019  
**Transaction ID : SA.146763.1.Q319**  
 Amount of Each Receipt this Period 4800.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. OPATRY, DONALD, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 11086

City JACKSON	State WY	Zip Code 83002-1086
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) SELF EMPLOYED		Occupation (for Individual) INVESTOR
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4400.00

Date of Receipt  
08 / 15 / 2019  
**Transaction ID : SA.144454.1.Q319**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. PATTERSON, CARY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2900 ST. MICHAEL DR STE 500

City TEXARKANA	State TX	Zip Code 75503-5211
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) NIX PATTERSON		Occupation (for Individual) ATTORNEY
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4400.00

Date of Receipt  
06 / 30 / 2019  
**Transaction ID : SA.138481.1.Q319**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. PEROT, H., ROSS, MR., JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3000 TURTLE CREEK BLVD

City DALLAS	State TX	Zip Code 75219-6268
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) PEROT SYSTEMS CORPORATION		Occupation (for Individual) CHAIRMAN
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
07 / 26 / 2019  
**Transaction ID : SA.142394.1.Q319**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 33 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. ROCKEFELLER, LISENNE, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 3157

City LITTLE ROCK	State AR	Zip Code 72203-3157
---------------------	-------------	------------------------

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

Name of Employer (for Individual) WINROCK FARMS, INC.	Occupation (for Individual) CHAIR & CEO
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	15	/	2019

**Transaction ID : SA.144480.1.Q319**

Amount of Each Receipt this Period  
2600.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. RULE, CHARLES, F., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 2001 K ST NW

City WASHINGTON	State DC	Zip Code 20006-1037
--------------------	-------------	------------------------

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

Name of Employer (for Individual) PAUL WEISS RIFKIND WHARTON GARRISON	Occupation (for Individual) LAWYER
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	07	/	2019

**Transaction ID : SA.143723.1.Q319**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. SABIN, ANDREW, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 300 PANTIGO PL

City EAST HAMPTON	State NY	Zip Code 11937-2684
----------------------	-------------	------------------------

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

Name of Employer (for Individual) SABIN METAL CORP.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2019

**Transaction ID : SA.138483.1.Q319**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 34 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. SEWELL, GARY, W., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 3400 JUNCTION CITY HIGHWAY

City EL DORADO	State AR	Zip Code 71730-8308
-------------------	-------------	------------------------

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

Name of Employer (for Individual) SEWELL DRILLING, LLC	Occupation (for Individual) BUSINESS OWNER
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2216.36

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2019

**Transaction ID : SA.146759.1.Q319**

Amount of Each Receipt this Period  
2216.36

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. SNIDER, STEVEN, J., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 122 SHORNECLIFFE RD

City NEWTON	State MA	Zip Code 02458-2421
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) REAL ESTATE
--	--

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
06	/	30	/	2019

**Transaction ID : SA.138474.1.Q319**

Amount of Each Receipt this Period  
400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. SPITZER, HORTON, S., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. BOX 1307

City WILSON	State WY	Zip Code 83014-1307
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	17	/	2019

**Transaction ID : SA.146774.1.Q319**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 35 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. STUCKER, MARYANN, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 250 PARK SHORE DRIVE #601

City NAPLES State FL Zip Code 34103-3441

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 06 / 30 / 2019  
**Transaction ID : SA.144890.1.Q319**

Amount of Each Receipt this Period 4000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. SUGDEN, RICHARD, G., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 189

City JACKSON State WY Zip Code 83001-0189

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

Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4400.00

Date of Receipt 08 / 15 / 2019  
**Transaction ID : SA.144446.1.Q319**

Amount of Each Receipt this Period 4400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. TENZER, LEE, , MR. ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9762 BENTGRASS BEND

City NAPLES State FL Zip Code 34108-1933

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

Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED

Receipt For:  Primary  General  Other (specify)

Aggregate Year-to-Date ▼ 1400.00

Date of Receipt 03 / 08 / 2019  
**Transaction ID : SA.141274.1.Q319**

Amount of Each Receipt this Period 1400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 36 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. WARMACK, JOHN, P., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 5308

City TEXARKANA	State TX	Zip Code 75505-5308
-------------------	-------------	------------------------

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

Name of Employer (for Individual) WARMARCK & CO	Occupation (for Individual) OWNER
--	--------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2019

**Transaction ID : SA.138495.1.Q319**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. COTTON VICTORY**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 N WASHINGTON ST  
SUITE 700

City ALEXANDRIA	State VA	Zip Code 22314-5509
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00571018

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
524987.78

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2019

**Transaction ID : SA12.159635**

Amount of Each Receipt this Period  
55973.55

Memo Item  
TRANSFER

**C. ABERS, ANNA, OPROGLOU, MS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4600 VIA DOLCE, APT 306

City MARINA DEL REY	State CA	Zip Code 90292-
------------------------	-------------	--------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2019

**Transaction ID : SA.154583.1.Q419**

Amount of Each Receipt this Period  
2400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55973.55
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 37 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. BLOOM, RONALD, H., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 433 N CAMDEN DR STE 888  
 City BEVERLY HILLS State CA Zip Code 90210-4412  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CROWN ASSOCIATES REALTY, INC. Occupation (for Individual) INDUSTRIAL REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 2800.00

Date of Receipt 11 / 08 / 2019  
**Transaction ID : SA.154584.1.Q419**  
 Amount of Each Receipt this Period 2800.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. CHILDS, JOHN, W., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 116 HUNTINGTON AVENUE SUITE 701  
 City BOSTON State MA Zip Code 02116-5790  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J.W. CHILDS ASSOCIATES Occupation (for Individual) CHAIRMAN  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 08 / 2019  
**Transaction ID : SA.154199.1.Q419**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. CHILDS, MARLENE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 500 TOTTEN POND ROAD FLOOR 6  
 City WALTHAM State MA Zip Code 02451-1916  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 08 / 2019  
**Transaction ID : SA.154200.1.Q419**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 38 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. CROCKER, CHARLES, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1405 MONTGOMERY STREET  
 City SAN FRANCISCO State CA Zip Code 94133-3211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 700.00

Date of Receipt **04 / 09 / 2019**  
**Transaction ID : SA.130602.1.Q419**  
 Amount of Each Receipt this Period 700.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. CROW, ROBERT, NATHANIEL, MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4612 WATAUGA RD  
 City DALLAS State TX Zip Code 75209-1922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LOCHE LORD L.L.P. Occupation (for Individual) LAWYER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **12 / 10 / 2019**  
**Transaction ID : SA.155641.1.Q419**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. DRETZKA, SILVIA, , MRS.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6632 KENTWOOD BLUFFS DR  
 City LOS ANGELES State CA Zip Code 90045-1259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HOMEMAKER Occupation (for Individual) HOMEMAKER  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2050.00

Date of Receipt **11 / 08 / 2019**  
**Transaction ID : SA.154579.1.Q419**  
 Amount of Each Receipt this Period 2050.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. FLAKE, JOHN, J., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 W CAPITOL AVE  
 City LITTLE ROCK State AR Zip Code 72201-3405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) FLAKE AND KELLEY COMMERCIAL Occupation (for Individual) REAL ESTATE  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 04 / 2019  
**Transaction ID : SA.149975.1.Q419**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. HICKS, THOMAS, O., MR., SR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2200 ROSS AVENUE, 50TH FLOOR  
 City DALLAS State TX Zip Code 75201-2708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 25 / 2019  
**Transaction ID : SA.155357.1.Q419**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. HORNSTEIN, STEVE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 100 PARK AVENUE 35TH FLOOR  
 City NEW YORK State NY Zip Code 10017-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) GLOBAL CREDIT ADVISERS Occupation (for Individual) CHIEF INVESTMENT OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 10 / 2019  
**Transaction ID : SA.155640.1.Q419**  
 Amount of Each Receipt this Period 250.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 40 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. KORENVAES, HARLAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3879 MAPLE AVE; STE 150  
 City DALLAS State TX Zip Code 75219-3971  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KORENVAES MGT. LLC Occupation (for Individual) INVESTMENT MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 26 / 2019**  
**Transaction ID : SA.155359.1.Q419**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. MILLER, MICHAEL, D., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3611 MOTOR AVENUE  
 City LOS ANGELES State CA Zip Code 90034-5748  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CORDARY, INC Occupation (for Individual) REAL ESTATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 4800.00

Date of Receipt **05 / 11 / 2018**  
**Transaction ID : SA.124216.1.Q419**  
 Amount of Each Receipt this Period -200.00  
 Memo Item  
 TRANSFER  
 2018 AGGREGATE; TRANSFER FROM COTTON VICTORY

**C. MILLER, MICHAEL, D., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3611 MOTOR AVENUE  
 City LOS ANGELES State CA Zip Code 90034-5748  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CORDARY, INC Occupation (for Individual) REAL ESTATE INVESTOR  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **11 / 01 / 2019**  
**Transaction ID : SA.152896.1.Q419**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 41 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. MILLER, NORMAN, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12770 MERIT DR. #300

City DALLAS	State TX	Zip Code 75251-1402
----------------	-------------	------------------------

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

Name of Employer (for Individual) INTERSTATE BATTERIES	Occupation (for Individual) CHAIRMAN
---	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2019

**Transaction ID : SA.155383.1.Q419**

Amount of Each Receipt this Period  
4400.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. MORGAN, JUDY, K., ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 OAKHOLLOW DR

City TEXARKANA	State TX	Zip Code 75503-1727
-------------------	-------------	------------------------

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

Name of Employer (for Individual) JACK B. KELLEY ENT.	Occupation (for Individual) PRESIDENT
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	26	/	2019

**Transaction ID : SA.150610.1.Q419**

Amount of Each Receipt this Period  
500.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. O'REILLY, DAVID, J., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6001 BOLLINGER CANYON RD BLDG C

City SAN RAMON	State CA	Zip Code 94583-2324
-------------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	08	/	2019

**Transaction ID : SA.154587.1.Q419**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 42 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. O'REILLY, JOAN, , MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2158 LAS TRAMPAS RD

City ALAMO	State CA	Zip Code 94507-1862
---------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11	/	08	/	2019

**Transaction ID : SA.154582.1.Q419**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. PERRYMAN, GLENDA, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 453

City BURTON	State TX	Zip Code 77835-0453
----------------	-------------	------------------------

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

Name of Employer (for Individual) SELF	Occupation (for Individual) HORSE OWNER
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2800.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
04	/	24	/	2019

**Transaction ID : SA.131314.1.Q419**

Amount of Each Receipt this Period  
2800.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. PFAUTCH, ROY, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 52 PORTLAND PLACE

City SAINT LOUIS	State MO	Zip Code 63108-1242
---------------------	-------------	------------------------

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

Name of Employer (for Individual) CIVIC SERVICE INC.	Occupation (for Individual) CONSULTANT
---	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12	/	20	/	2019

**Transaction ID : SA.157869.1.Q419**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. POPOLO, JOE, V., , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9002 DOUGLAS AVENUE  
 City DALLAS State TX Zip Code 75225-3009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CHARLES & POTOMAC CAPITAL LLC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 12 / 2019  
**Transaction ID : SA.154387.1.Q419**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. QUEALLY, PAUL, B., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address SEABREEZE AVENUE 326  
 City PALM BEACH State FL Zip Code 33480-6131  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WELSH, CARSON, ANDERSON & STOWE Occupation (for Individual) GENERAL PARTNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 11 / 12 / 2019  
**Transaction ID : SA.154390.1.Q419**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. RIEDEL, CHRIS, C., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 213 FORRESTER RD  
 City LOS GATOS State CA Zip Code 95032-6508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 12 / 27 / 2019  
**Transaction ID : SA.158632.1.Q419**  
 Amount of Each Receipt this Period 2400.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 0.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. SOBEL, CLIFFORD, , THE HONORA,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 MILLBURN AVE SUITE 202

City MILLBURN	State NJ	Zip Code 07041-1712
------------------	-------------	------------------------

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

Name of Employer (for Individual) VALOR CAPITAL GROUP	Occupation (for Individual) EXECUTIVE
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4720.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	14	/	2019

**Transaction ID : SA.161771.1.Q419**

Amount of Each Receipt this Period  
4720.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. SPITZER, HORTON, S., MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 1307

City WILSON	State WY	Zip Code 83014-1307
----------------	-------------	------------------------

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

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	13	/	2019

**Transaction ID : SA.157365.1.Q419**

Amount of Each Receipt this Period  
600.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. SUTTON, BEN, C., MR., JR.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 21528

City WINSTON SALEM	State NC	Zip Code 27120-1528
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) TEALL INVESTMENTS	Occupation (for Individual) CHAIRMAN
--	---

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2019

**Transaction ID : SA.157868.1.Q419**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 45 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. TROUTT, LISA, C., MRS.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10595 STRAIT LANE

City DALLAS	State TX	Zip Code 75229-5424
----------------	-------------	------------------------

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

Name of Employer (for Individual) HOMEMAKER	Occupation (for Individual) HOMEMAKER
--	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	27	/	2019

**Transaction ID : SA.155381.1.Q419**

Amount of Each Receipt this Period  
5000.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**B. WALDRIP, MARK, , MR.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6378 HIGHWAY 78 W

City MORO	State AR	Zip Code 72368-9440
--------------	-------------	------------------------

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

Name of Employer (for Individual) SELF-EMPLOYED	Occupation (for Individual) BANK OWNER
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2019

**Transaction ID : SA.149974.1.Q419**

Amount of Each Receipt this Period  
500.00

Memo Item  
TRANSFER  
TRANSFER FROM COTTON VICTORY

**C. BBVA USA BANCSHARES, INC. PAC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 10566

City BIRMINGHAM	State AL	Zip Code 35296-0001
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FEC ID number of contributing federal political committee. **C** C00142596

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2017

**Transaction ID : SA.113555.1.Q419**

Amount of Each Receipt this Period  
1000.00

Memo Item  
TRANSFER  
2017 AGGREGATE; TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 46 OF 80
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. DAVITA INC. POLITICAL ACTION COMMITTEE (DAPAC)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 32275 32ND AVE, S.  
 City FEDERAL WAY State WA Zip Code 98001-9616  
 FEC ID number of contributing federal political committee. **C** C00340943  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2019  
**Transaction ID : SA.157587.1.Q419**  
 Amount of Each Receipt this Period  
 3000.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**B. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2980 FAIRVIEW PARK DRIVE  
 City FALLS CHURCH State VA Zip Code 22042-4511  
 FEC ID number of contributing federal political committee. **C** C00088591  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2019  
**Transaction ID : SA.157589.1.Q419**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

**C. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2980 FAIRVIEW PARK DRIVE  
 City FALLS CHURCH State VA Zip Code 22042-4511  
 FEC ID number of contributing federal political committee. **C** C00088591  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 18 / 2019  
**Transaction ID : SA.157590.1.Q419**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item  
 TRANSFER  
 TRANSFER FROM COTTON VICTORY

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	167222.89

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

**A. O'DONNELL AND ASSOCIATES, LTD.**

Full Name (Last, First, Middle Initial)  
Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
PAC COMMUNICATIONS/POLITICAL CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 07 / 01 / 2019

FEC Identification Number: C  
Transaction ID : SB21B.I5077  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**B. COLAS, BRIAN, , ,**

Full Name (Last, First, Middle Initial)  
Mailing Address 4009 23RD STREET N

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement  
PAC MANAGEMENT/POLITICAL CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 07 / 03 / 2019

FEC Identification Number: C  
Transaction ID : SB21B.I5137  
Amount of Each Disbursement this Period: 1700.00

Memo Item

**C. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
PAC CREDIT CARD/MERCHANT FEES

Candidate Name

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

State: District:

Date of Disbursement: 07 / 05 / 2019

FEC Identification Number: C  
Transaction ID : SB21B.I6347  
Amount of Each Disbursement this Period: 23.30

Memo Item

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

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

3723.30

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
PAC CREDIT CARD/MERCHANT FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I5269  
Amount of Each Disbursement this Period

[REDACTED] 487.31

Memo Item

Full Name (Last, First, Middle Initial)

**B. FP1 STRATEGIES, LLC**

Mailing Address 3001 WASHINGTON BLVD.  
7TH FLOOR

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
PAC MEDIA CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I5271  
Amount of Each Disbursement this Period

[REDACTED] 1250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE MORNING GROUP**

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
07 / 16 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I5272  
Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

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

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

[REDACTED] 6737.31

[REDACTED]



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)

**A. AT&T SERVICES, INC.**

Mailing Address 1120 20TH STREET, NW  
SUITE 800

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
PAC VENUE/TICKETS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 19 / 2019

FEC Identification Number

C

**Transaction ID : SB21B.I5273**  
Amount of Each Disbursement this Period

3636.36

Memo Item

Full Name (Last, First, Middle Initial)

**B. KOCH & HOOS, LLC**

Mailing Address 901 N WASHINGTON ST STE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC ACCOUNTING CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 25 / 2019

FEC Identification Number

C

**Transaction ID : SB21B.I5418**  
Amount of Each Disbursement this Period

2782.25

Memo Item

Full Name (Last, First, Middle Initial)

**C. UNISOURCE DIRECT, LLC**

Mailing Address P.O. BOX 82

City WATERTOWN State WI Zip Code 53094

Purpose of Disbursement  
PAC DIRECT MAIL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
07 / 30 / 2019

FEC Identification Number

C

**Transaction ID : SB21B.I5423**  
Amount of Each Disbursement this Period

37010.11

Memo Item

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

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

43428.72

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)  
**A. O'DONNELL AND ASSOCIATES, LTD.**

Date of Disbursement  
MM / DD / YYYY  
07 / 31 / 2019

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
PAC COMMUNICATIONS/POLITICAL CONSULTING

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.I5428  
Amount of Each Disbursement this Period  
2000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. FP1 STRATEGIES, LLC**

Date of Disbursement  
MM / DD / YYYY  
08 / 02 / 2019

Mailing Address 3001 WASHINGTON BLVD.  
7TH FLOOR

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
PAC MEDIA CONSULTING

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.I5430  
Amount of Each Disbursement this Period  
1250.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. COLAS, BRIAN, , ,**

Date of Disbursement  
MM / DD / YYYY  
08 / 05 / 2019

Mailing Address 4009 23RD STREET N

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement  
PAC MANAGEMENT/POLITICAL CONSULTING

Candidate Name

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

State: District:

FEC Identification Number  
C  
Transaction ID : SB21B.I5431  
Amount of Each Disbursement this Period  
3000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement  
PAC CREDIT CARD/MERCHANT FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I6348

Amount of Each Disbursement this Period

[REDACTED] 146.39

Memo Item

Full Name (Last, First, Middle Initial)

**B. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC ONLINE FUNDRAISING & PROCESSING FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I6353

Amount of Each Disbursement this Period

[REDACTED] 2.32

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE MORNING GROUP**

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 06 / 2019

FEC Identification Number

C [REDACTED]

Transaction ID : SB21B.I5432

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

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

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

[REDACTED] 5148.71

[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2019	
Mailing Address P.O. BOX 1270		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I5967</b> Amount of Each Disbursement this Period [ ] 628.58	
City NEWARK	State NJ	Zip Code 07101	Category/ Type [ ]
Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMOS		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 08 / 12 / 2019	
Mailing Address P.O. BOX 1270		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I5976</b> Amount of Each Disbursement this Period [ ] 330.00	
City NEWARK	State NJ	Zip Code 07101	Category/ Type [ ]
Purpose of Disbursement PAC CREDIT CARD 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) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement MM / DD / YYYY 08 / 16 / 2019	
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I5437</b> Amount of Each Disbursement this Period [ ] 244.72	
City TYSONS CORNER	State VA	Zip Code 22182	Category/ Type [ ]
Purpose of Disbursement PAC CREDIT CARD/MERCHANT 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) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

873.30

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial) <b>A. KOCH &amp; HOOS, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2019
Mailing Address 901 N WASHINGTON ST STE 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5446</b> Amount of Each Disbursement this Period 4111.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAC ACCOUNTING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. UNISOURCE DIRECT, LLC</b>		Date of Disbursement MM / DD / YYYY 08 / 28 / 2019
Mailing Address P.O. BOX 82		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5451</b> Amount of Each Disbursement this Period 39972.32
City WATERTOWN	State WI	Zip Code 53094
Purpose of Disbursement PAC DIRECT MAIL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. CHAIN BRIDGE BANK</b>		Date of Disbursement MM / DD / YYYY 08 / 30 / 2019
Mailing Address 1445-A LAUGHLIN AVENUE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I6352</b> Amount of Each Disbursement this Period 134.40
City MCLEAN	State VA	Zip Code 22101
Purpose of Disbursement PAC BANK FEE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	44217.72
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)

**A. FP1 STRATEGIES, LLC**

Mailing Address 3001 WASHINGTON BLVD.  
7TH FLOOR

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
PAC MEDIA CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.I5452**  
Amount of Each Disbursement this Period  
1250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
PAC COMMUNICATIONS/POLITICAL CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.I5454**  
Amount of Each Disbursement this Period  
2000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE MORNING GROUP**

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 30 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.I5453**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

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

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

8250.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)

**A. COLAS, BRIAN, , ,**

Mailing Address 4009 23RD STREET N

City  
ARLINGTON

State  
VA

Zip Code  
22207

Purpose of Disbursement  
PAC MANAGEMENT/POLITICAL CONSULTING

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

**Transaction ID : SB21B.I5456**

Amount of Each Disbursement this Period

3000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address P.O. BOX 1270

City  
NEWARK

State  
NJ

Zip Code  
07101

Purpose of Disbursement  
PAC CREDIT CARD/MERCHANT FEES

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

**Transaction ID : SB21B.I6349**

Amount of Each Disbursement this Period

9.86

Memo Item

Full Name (Last, First, Middle Initial)

**C. CAMPAIGN SOLUTIONS**

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
PAC ONLINE FUNDRAISING & PROCESSING FEES

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

**C**

**Transaction ID : SB21B.I6354**

Amount of Each Disbursement this Period

2.71

Memo Item

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

3012.57

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2019	
Mailing Address P.O. BOX 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5982</b> Amount of Each Disbursement this Period 2132.00	
City NEWARK	State NJ	Zip Code 07101	Category/ Type
Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMOS			
Candidate Name		Memo Item <input type="checkbox"/>	
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>B. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2019	
Mailing Address P.O. BOX 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5987</b> Amount of Each Disbursement this Period - 55.00	
City NEWARK	State NJ	Zip Code 07101	Category/ Type
Purpose of Disbursement PAC CREDIT CARD FEE CREDIT			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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>C. LEVY RESTAURANTS</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2019	
Mailing Address 1500 SOUTH CAPITOL STREET SW		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5985</b> Amount of Each Disbursement this Period 2118.74	
City WASHINGTON	State DC	Zip Code 20003	Category/ Type
Purpose of Disbursement PAC CATERING			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2132.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
PAC CREDIT CARD/MERCHANT FEES

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I5467  
Amount of Each Disbursement this Period  
1515.64

Memo Item

Full Name (Last, First, Middle Initial)

**B. KOCH & HOOS, LLC**

Mailing Address 901 N WASHINGTON ST STE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
PAC ACCOUNTING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I5468  
Amount of Each Disbursement this Period  
3593.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. THE RIZZO DUKES GROUP**

Mailing Address 1316 ALEXANDRIA AVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
09 / 18 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I5465  
Amount of Each Disbursement this Period  
2250.00

Memo Item

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

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

6358.64

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

**A. O'DONNELL AND ASSOCIATES, LTD.**

Full Name (Last, First, Middle Initial)  
Mailing Address 829 EMERALD DRIVE

City ALEXANDRIA State VA Zip Code 22308

Purpose of Disbursement  
PAC COMMUNICATIONS/POLITICAL CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 09 / 30 / 2019

FEC Identification Number: C  
Transaction ID : SB21B.I5485  
Amount of Each Disbursement this Period: 2000.00

Memo Item

**B. COLAS, BRIAN, , ,**

Full Name (Last, First, Middle Initial)  
Mailing Address 4009 23RD STREET N

City ARLINGTON State VA Zip Code 22207

Purpose of Disbursement  
PAC MANAGEMENT/POLITICAL CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 10 / 01 / 2019

FEC Identification Number: C  
Transaction ID : SB21B.I5489  
Amount of Each Disbursement this Period: 3000.00

Memo Item

**C. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)  
Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 10 / 01 / 2019

FEC Identification Number: C  
Transaction ID : SB21B.I5490  
Amount of Each Disbursement this Period: 5000.00

Memo Item

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

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

10000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial) <b>A. MACLEAN, AARON, , ,</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2019	
Mailing Address 19 E REED AVENUE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5491</b> Amount of Each Disbursement this Period 5000.00	
City ALEXANDRIA	State VA	Zip Code 22305	Category/ Type [REDACTED]
Purpose of Disbursement PAC POLITICAL STRATEGY CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2019	
Mailing Address P.O. BOX 1270		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I6350</b> Amount of Each Disbursement this Period 1.60	
City NEWARK	State NJ	Zip Code 07101	Category/ Type [REDACTED]
Purpose of Disbursement PAC CREDIT CARD/MERCHANT 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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement MM / DD / YYYY 10 / 11 / 2019	
Mailing Address 1593 SPRING HILL RD SUITE 400		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5615</b> Amount of Each Disbursement this Period 48.49	
City TYSONS CORNER	State VA	Zip Code 22182	Category/ Type [REDACTED]
Purpose of Disbursement PAC CREDIT CARD/MERCHANT 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) ▼		Memo Item <input type="checkbox"/>
State: District:			

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

5050.09

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

**A. FP1 STRATEGIES, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 3001 WASHINGTON BLVD.  
7TH FLOOR

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement PAC MEDIA CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 11 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I5617

Amount of Each Disbursement this Period: 1250.00

Memo Item

**B. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMOS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I6065

Amount of Each Disbursement this Period: 1663.20

Memo Item

**C. LEVY RESTAURANTS**

Full Name (Last, First, Middle Initial)

Mailing Address 1500 SOUTH CAPITOL STREET SW

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement PAC CATERING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 10 / 13 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I6066

Amount of Each Disbursement this Period: 1663.20

Memo Item

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

2913.20

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial) <b>A. UNISOURCE DIRECT, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2019
Mailing Address P.O. BOX 82		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5848</b> Amount of Each Disbursement this Period 1023.32
City WATERTOWN	State WI	Zip Code 53094
Purpose of Disbursement PAC DIRECT MAIL		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. KOCH &amp; HOOS, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 30 / 2019
Mailing Address 901 N WASHINGTON ST STE 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5852</b> Amount of Each Disbursement this Period 3200.50
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAC ACCOUNTING CONSULTING		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. O'DONNELL AND ASSOCIATES, LTD.</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2019
Mailing Address 829 EMERALD DRIVE		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5853</b> Amount of Each Disbursement this Period 2000.00
City ALEXANDRIA	State VA	Zip Code 22308
Purpose of Disbursement PAC COMMUNICATIONS/POLITICAL CONSULTING		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	6223.82
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

**A. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City  
WASHINGTON

State  
DC

Zip Code  
20011

Purpose of Disbursement  
PAC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			31			2019			

FEC Identification Number

C [ ]

Transaction ID : SB21B.I5854

Amount of Each Disbursement this Period

[ ] 5000.00

Memo Item

**B. COLAS, BRIAN, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 4009 23RD STREET N

City  
ARLINGTON

State  
VA

Zip Code  
22207

Purpose of Disbursement  
PAC MANAGEMENT/POLITICAL CONSULTING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			04			2019			

FEC Identification Number

C [ ]

Transaction ID : SB21B.I5855

Amount of Each Disbursement this Period

[ ] 3000.00

Memo Item

**C. CAMPAIGN SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 117 N SAINT ASAPH ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
PAC ONLINE FUNDRAISING & PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2019			

FEC Identification Number

C [ ]

Transaction ID : SB21B.I6355

Amount of Each Disbursement this Period

[ ] 7.16

Memo Item

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

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

[ ] 8007.16

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)

**A. CMDI**

Mailing Address 1593 SPRING HILL RD  
SUITE 400

City TYSONS CORNER State VA Zip Code 22182

Purpose of Disbursement  
PAC CREDIT CARD/MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 07 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I5857  
Amount of Each Disbursement this Period  
16.37

Memo Item

Full Name (Last, First, Middle Initial)

**B. FP1 STRATEGIES, LLC**

Mailing Address 3001 WASHINGTON BLVD.  
7TH FLOOR

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
PAC MEDIA CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I5860  
Amount of Each Disbursement this Period  
1250.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN EXPRESS**

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

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  
11 / 12 / 2019

FEC Identification Number

C  
Transaction ID : SB21B.I6150  
Amount of Each Disbursement this Period  
1952.60

Memo Item

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

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

3218.97

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)

**A. DELTA AIRLINES**

Mailing Address 1030 DELTA BOULEVARD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
PAC TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 12 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.I6153**  
Amount of Each Disbursement this Period  
1952.60

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN EXPRESS**

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

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

M M / D D / Y Y Y Y Y  
11 / 12 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.I6174**  
Amount of Each Disbursement this Period  
3089.55

Memo Item

Full Name (Last, First, Middle Initial)

**C. HARPERCOLLINS PUBLISHERS, LLC**

Mailing Address 53 GLENMAURA NATIONAL BLVD.  
SUITE 300

City MOOSIC State PA Zip Code 18507

Purpose of Disbursement  
PAC PUBLICATIONS

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
11 / 12 / 2019

FEC Identification Number

C  
**Transaction ID : SB21B.I6177**  
Amount of Each Disbursement this Period  
3089.55

Memo Item

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

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

3089.55



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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial)

**A. THE RIZZO DUKES GROUP**

Mailing Address 1316 ALEXANDRIA AVE

City  
ALEXANDRIA

State  
VA

Zip Code  
22308

Purpose of Disbursement  
PAC FUNDRAISING 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
1	1	1		1	8			2	0	1	9		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.I5871**  
Amount of Each Disbursement this Period  
[Redacted] 1975.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICA RISING CORPORATION**

Mailing Address 1500 WILSON BLVD.  
5TH FLOOR

City  
ARLINGTON

State  
VA

Zip Code  
22209

Purpose of Disbursement  
PAC RESEARCH SERVICES

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
1	1	1		2	7			2	0	1	9		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.I5875**  
Amount of Each Disbursement this Period  
[Redacted] 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. O'DONNELL AND ASSOCIATES, LTD.**

Mailing Address 829 EMERALD DRIVE

City  
ALEXANDRIA

State  
VA

Zip Code  
22308

Purpose of Disbursement  
PAC COMMUNICATIONS/POLITICAL 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
1	1	1		2	7			2	0	1	9		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.I5874**  
Amount of Each Disbursement this Period  
[Redacted] 7500.00

Memo Item

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

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

1	1	9	7	5	0	0
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1	1	9	7	5	0	0
---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial) <b>A. UNISOURCE DIRECT, LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 27 / 2019
Mailing Address P.O. BOX 82		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5876</b> Amount of Each Disbursement this Period [REDACTED] 956.61
City WATERTOWN	State WI	Zip Code 53094
Purpose of Disbursement PAC DIRECT MAIL		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. COLAS, BRIAN, , ,</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2019
Mailing Address 4009 23RD STREET N		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5933</b> Amount of Each Disbursement this Period [REDACTED] 3000.00
City ARLINGTON	State VA	Zip Code 22207
Purpose of Disbursement PAC MANAGEMENT/POLITICAL CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. KOCH &amp; HOOS, LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 03 / 2019
Mailing Address 901 N WASHINGTON ST STE 700		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.I5909</b> Amount of Each Disbursement this Period [REDACTED] 2424.75
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement PAC ACCOUNTING CONSULTING		Category/ Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 6381.36
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

**A. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement PAC FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 03 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I5932

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. FP1 STRATEGIES, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 3001 WASHINGTON BLVD. 7TH FLOOR

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement PAC MEDIA CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 04 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I5934

Amount of Each Disbursement this Period: 2500.00

Memo Item

**C. AMERICAN EXPRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement PAC CREDIT CARD/MERCHANT FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 05 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I6351

Amount of Each Disbursement this Period: 0.58

Memo Item

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

7500.58

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

**A. THE MORNING GROUP**

Full Name (Last, First, Middle Initial)

Mailing Address 5918 4TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement PAC FUNDRAISING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 12 / 16 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I5944

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. KOCH & HOOS, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 N WASHINGTON ST STE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PAC ACCOUNTING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 12 / 17 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I5946

Amount of Each Disbursement this Period: 2882.75

Memo Item

**C. KOCH & HOOS, LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 901 N WASHINGTON ST STE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement PAC ACCOUNTING CONSULTING

Candidate Name

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

State: District:

Date of Disbursement: 12 / 30 / 2019

FEC Identification Number: C

Transaction ID : SB21B.I6025

Amount of Each Disbursement this Period: 2950.25

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 10833.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial) <b>A. FP1 STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2019	
Mailing Address 3001 WASHINGTON BLVD. 7TH FLOOR		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I6031</b> Amount of Each Disbursement this Period 2500.00	
City ARLINGTON	State VA	Zip Code 22201	Category/ Type [ ]
Purpose of Disbursement PAC MEDIA CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. O'DONNELL AND ASSOCIATES, LTD.</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2019	
Mailing Address 829 EMERALD DRIVE		FEC Identification Number C [ ] <b>Transaction ID : SB21B.I6032</b> Amount of Each Disbursement this Period 7500.00	
City ALEXANDRIA	State VA	Zip Code 22308	Category/ Type [ ]
Purpose of Disbursement PAC COMMUNICATIONS/POLITICAL CONSULTING		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY [ ] / [ ] / [ ]	
Mailing Address		FEC Identification Number C [ ] Amount of Each Disbursement this Period [ ]	
City	State	Zip Code	Category/ Type [ ]
Purpose of Disbursement		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	215325.00



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

Full Name (Last, First, Middle Initial) <b>A. CAPITO FOR WEST VIRGINIA</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2019
Mailing Address PO BOX 11519		FEC Identification Number C 00539825 <b>Transaction ID : SB23.I5449</b>
City CHARLESTON	State WV	Zip Code 25339
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>CAPITO, SHELLEY MOORE, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WV	District: 00	

Full Name (Last, First, Middle Initial) <b>B. CAPITO FOR WEST VIRGINIA</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2019
Mailing Address PO BOX 11519		FEC Identification Number C 00539825 <b>Transaction ID : SB23.I6356</b>
City CHARLESTON	State WV	Zip Code 25339
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>CAPITO, SHELLEY MOORE, , ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WV	District: 00	

Full Name (Last, First, Middle Initial) <b>C. DEB FISCHER FOR US SENATE</b>		Date of Disbursement MM / DD / YYYY 08 / 27 / 2019
Mailing Address 5555 SOUTH STRET SUITE 200		FEC Identification Number C 00498907 <b>Transaction ID : SB23.I5450</b>
City LINCOLN	State NE	Zip Code 68506
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 5000.00
Candidate Name <b>FISCHER, DEBRA, S, ,</b>		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NE	District: 00	

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

15000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Fund**

**A. DEB FISCHER FOR US SENATE**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 5555 SOUTH STRET  
SUITE 200

M M M	/	D D D	/	Y Y Y Y Y
08		27		2019

City LINCOLN State NE Zip Code 68506

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00498907
---	-----------

Candidate Name  
**FISCHER, DEBRA, S, ,**

Category/  
Type

**Transaction ID : SB23.I6358**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE GALLAGHER FOR WISCONSIN**

Date of Disbursement

Mailing Address PO BOX 1027

M M M	/	D D D	/	Y Y Y Y Y
08		30		2019

City GREEN BAY State WI Zip Code 54305

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00610212
---	-----------

Candidate Name  
**GALLAGHER, MICHAEL, , ,**

Category/  
Type

**Transaction ID : SB23.I5455**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  
 Primary  General  
 Other (specify)

5000.00
---------

Memo Item

Full Name (Last, First, Middle Initial)

**C. MCHENRY FOR CONGRESS**

Date of Disbursement

Mailing Address PO BOX 2165

M M M	/	D D D	/	Y Y Y Y Y
09		04		2019

City GASTONIA State NC Zip Code 28053

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00393629
---	-----------

Candidate Name  
**MCHENRY, PATRICK, , ,**

Category/  
Type

**Transaction ID : SB23.I5458**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

2500.00
---------

Memo Item

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

12500.00
----------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Fund**

**A. FISCHBACH FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 190

M M M	/	D D D	/	Y Y Y Y Y
09		11		2019

City LITCHFIELD State MN Zip Code 55355

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00717959
---	-----------

Candidate Name  
**FISCHBACH, MICHELLE, , ,**

Category/  
Type

**Transaction ID : SB23.I5460**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: MN District: 07

5000.00
---------

Memo Item

**B. KAY GRANGER CAMPAIGN FUND**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 1701 RIVER RUN  
SUITE 308

M M M	/	D D D	/	Y Y Y Y Y
09		12		2019

City FORT WORTH State TX Zip Code 76107

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00310532
---	-----------

Candidate Name  
**GRANGER, KAY, , ,**

Category/  
Type

**Transaction ID : SB23.I5461**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: TX District: 12

5000.00
---------

Memo Item

**C. BRIAN FITZPATRICK FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 939

M M M	/	D D D	/	Y Y Y Y Y
09		13		2019

City LANGHORNE State PA Zip Code 19047

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00607416
---	-----------

Candidate Name  
**FITZPATRICK, BRIAN, , ,**

Category/  
Type

**Transaction ID : SB23.I5462**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: PA District: 01

5000.00
---------

Memo Item

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

15000.00
----------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Fund**

**A. FRIENDS OF JIM INHOFE**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 13300

City OKLAHOMA CITY State OK Zip Code 73113

Purpose of Disbursement CONTRIBUTION

Candidate Name INHOFE, JAMES, M., ,

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify) ▼  
 State: OK District: 00

Date of Disbursement  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 17 / 2019

FEC Identification Number  
**C** C00207993  
**Transaction ID : SB23.I5464**  
 Amount of Each Disbursement this Period  
 3000.00

Memo Item

**B. BEN SASSE FOR U.S. SENATE INC.**

Full Name (Last, First, Middle Initial)

Mailing Address 700 R STREET UNIT 83978

City LINCOLN State NE Zip Code 68501

Purpose of Disbursement CONTRIBUTION

Candidate Name SASSE, BENJAMIN, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify) ▼  
 State: NE District: 00

Date of Disbursement  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 19 / 2019

FEC Identification Number  
**C** C00547976  
**Transaction ID : SB23.I5469**  
 Amount of Each Disbursement this Period  
 5000.00

Memo Item

**C. MIKE GALLAGHER FOR WISCONSIN**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1027

City GREEN BAY State WI Zip Code 54305

Purpose of Disbursement CONTRIBUTION

Candidate Name GALLAGHER, MICHAEL, , ,

Office Sought:  House  Senate  President  
 Disbursement For: 2020  Primary  General  Other (specify) ▼  
 State: WI District: 08

Date of Disbursement  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 24 / 2019

FEC Identification Number  
**C** C00610212  
**Transaction ID : SB23.I5478**  
 Amount of Each Disbursement this Period  
 5000.00

Memo Item

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

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

13000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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 Fund**

**A. DAN CRENSHAW FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 430965

City HOUSTON State TX Zip Code 77243

Purpose of Disbursement CONTRIBUTION

Candidate Name CRENSHAW, DANIEL, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: TX District: 02

Date of Disbursement: 11 / 07 / 2019

FEC Identification Number: C00660795  
Transaction ID : SB23.I5856  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. DAN CRENSHAW FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 430965

City HOUSTON State TX Zip Code 77243

Purpose of Disbursement CONTRIBUTION

Candidate Name CRENSHAW, DANIEL, , ,

Office Sought:  House  Senate  President

Disbursement For: 2020  Primary  General  Other (specify) ▼

State: TX District: 02

Date of Disbursement: 11 / 07 / 2019

FEC Identification Number: C00660795  
Transaction ID : SB23.I6357  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C. HOEVEN FOR SENATE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 861

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement CONTRIBUTION

Candidate Name HOEVEN, JOHN, , ,

Office Sought:  House  Senate  President

Disbursement For: 2022  Primary  General  Other (specify) ▼

State: ND District: 00

Date of Disbursement: 11 / 13 / 2019

FEC Identification Number: C00473371  
Transaction ID : SB23.I5864  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 15000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Fund**

**A. ALASKANS FOR DAN SULLIVAN**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3705 ARCTIC BLVD.  
#447

M M M	/	D D D	/	Y Y Y Y Y
12	/	04	/	2019

City ANCHORAGE State AK Zip Code 99503

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00570994
---	-----------

Candidate Name  
**SULLIVAN, DAN, , ,**

Category/  
Type

**Transaction ID : SB23.I5935**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: AK District: 00

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

5000.00
---------

Memo Item

**B. JOHN JAMES FOR SENATE INC.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2969

M M M	/	D D D	/	Y Y Y Y Y
12	/	04	/	2019

City FARMINGTON HILLS State MI Zip Code 48333

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00651208
---	-----------

Candidate Name  
**JAMES, JOHN, , ,**

Category/  
Type

**Transaction ID : SB23.I5936**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: MI District: 00

Disbursement For: 2020  
 Primary  General  
 Other (specify)

5000.00
---------

Memo Item

**C. JOHN JAMES FOR SENATE INC.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 2969

M M M	/	D D D	/	Y Y Y Y Y
12	/	04	/	2019

City FARMINGTON HILLS State MI Zip Code 48333

FEC Identification Number

Purpose of Disbursement  
CONTRIBUTION

C	C00651208
---	-----------

Candidate Name  
**JAMES, JOHN, , ,**

Category/  
Type

**Transaction ID : SB23.I6360**

Amount of Each Disbursement this Period

Office Sought:  House  
 Senate  
 President  
State: MI District: 00

Disbursement For: 2020  
 Primary  General  
 Other (specify) ▼

5000.00
---------

Memo Item

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

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

15000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 Fund**

**A. ANN WAGNER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
ANN WAGNER FOR CONGRESS

Date of Disbursement: 12 / 30 / 2019

Mailing Address: PO BOX 50

City: BALLWIN, State: MO, Zip Code: 63022

Purpose of Disbursement: CONTRIBUTION

Candidate Name: WAGNER, ANN, , ,

Office Sought:  House,  Senate,  President

Disbursement For: 2020,  Primary,  General,  Other (specify) ▼

State: MO, District: 02

FEC Identification Number: C00495846  
Transaction ID: SB23.I6026  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. GEORGIANS FOR KELLY LOEFFLER**

Full Name (Last, First, Middle Initial)  
GEORGIANS FOR KELLY LOEFFLER

Date of Disbursement: 12 / 31 / 2019

Mailing Address: PO BOX 20036

City: ATLANTA, State: GA, Zip Code: 30325

Purpose of Disbursement: CONTRIBUTION

Candidate Name: LOEFFLER, KELLY, , ,

Office Sought:  House,  Senate,  President

Disbursement For: 2020,  Primary,  General,  Other (specify) ▼

State: GA, District: 00

FEC Identification Number: C00729608  
Transaction ID: SB23.I6034  
Amount of Each Disbursement this Period: 5000.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City, State, Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House,  Senate,  President

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

State, District

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	7500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	123000.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

**A. HONORING OF HEROES**

Full Name (Last, First, Middle Initial)

Mailing Address 4400 SW BEECH LANE

City BENTONVILLE State AR Zip Code 72713

Purpose of Disbursement DONATION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY  
08 / 08 / 2019

FEC Identification Number: C

Transaction ID : SB29.I5433

Amount of Each Disbursement this Period: 1000.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: C

Amount of Each Disbursement this Period

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 80 OF 80
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**Republican Majority Fund**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FP1 Strategies, LLC</b>			Nature of Debt (Purpose): Media Production/Consulting
Mailing Address 3001 Washington Blvd. 7th Floor			
City Arlington	State VA	Zip Code 22201	

Outstanding Balance Beginning This Period		Transaction ID : SD10.1786	
1250.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	1250.00	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)▶	