

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 National Court Reporters Association

ADDRESS (number and street) 12030 Sunrise Valley Drive Suite 400 Reston VA 20191 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00146506 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 (checked), July 31, Termination Report (b) Monthly Report Due On: Feb 20 (M2) to Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 07 01 2021 through 12 31 2021

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Wenhold, Dave, , , Type or Print Name of Treasurer

Signature of Treasurer Wenhold, Dave, , , [Electronically Filed] Date 01 21 2022

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

National Court Reporters Association

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="2021"/>	<input type="text" value="62216.32"/>	<input type="text" value="62216.32"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="62523.15"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1840.00"/>	<input type="text" value="2340.00"/>
(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="64363.15"/>	<input type="text" value="64556.32"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="223.34"/>	<input type="text" value="416.51"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="64139.81"/>	<input type="text" value="64139.81"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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

National Court Reporters Association

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).....	250.00	250.00
(ii) Unitemized	1590.00	2090.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1840.00	2340.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1840.00	2340.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	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)).....▶	1840.00	2340.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1840.00	2340.00

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	223.34	416.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	223.34	416.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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).....	0.00	0.00
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)) ..	223.34	416.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	223.34	416.51

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1840.00	2340.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1840.00	2340.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	223.34	416.51
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	223.34	416.51

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 6 OF 9
(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	

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)
National Court Reporters Association

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stelfox, Julie, , ,

Mailing Address P.O. Box 29548

City St. Louis	State MO	Zip Code 63126-8548
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Metro Court Reporting, Inc.	Occupation (for Individual) Freelance Court Reporter
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		15		2021

Transaction ID : SA11Al.11961

Amount of Each Receipt this Period
250.00

Memo Item Contribution

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)
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	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	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	250.00

**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)
National Court Reporters Association

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2021

Mailing Address P.O. Box 622227

City Orlando State FL Zip Code 32862

FEC Identification Number

C	C00146506
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Purpose of Disbursement
Bank Fee

001
Category/ Type

Transaction ID : SB21B.11981

Amount of Each Disbursement this Period

10.00

Candidate Name

National Court Reporters Association

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:	

Memo Item

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		02		2021

Mailing Address P.O. Box 622227

City Orlando State FL Zip Code 32862

FEC Identification Number

C	
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Purpose of Disbursement
Bank Fee

001
Category/ Type

Transaction ID : SB21B.11982

Amount of Each Disbursement this Period

1.00

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:	

Memo Item

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2021

Mailing Address P.O. Box 622227

City Orlando State FL Zip Code 32862

FEC Identification Number

C	C00146506
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Purpose of Disbursement
Bank Fee

001
Category/ Type

Transaction ID : SB21B.11983

Amount of Each Disbursement this Period

10.00

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:	

Memo Item

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

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

21.00

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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 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)
National Court Reporters Association

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2021

Mailing Address P.O. Box 622227

FEC Identification Number

C	C00146506
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City Orlando State FL Zip Code 32862

Transaction ID : SB21B.11984

Purpose of Disbursement
Bank Fee

001
Category/ Type

Amount of Each Disbursement this Period

25.00

Candidate Name

National Court Reporters Association

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2021

Mailing Address P.O. Box 622227

FEC Identification Number

C	C00146506
---	-----------

City Orlando State FL Zip Code 32862

Transaction ID : SB21B.11986

Purpose of Disbursement
Bank Fee

001
Category/ Type

Amount of Each Disbursement this Period

10.00

Candidate Name

National Court Reporters Association

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		03		2021

Mailing Address P.O. Box 622227

FEC Identification Number

C	C00146506
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City Orlando State FL Zip Code 32862

Transaction ID : SB21B.11987

Purpose of Disbursement
Bank Fee

001
Category/ Type

Amount of Each Disbursement this Period

25.00

Candidate Name

National Court Reporters Association

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

Memo Item

State: District:

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

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

60.00

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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 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)
National Court Reporters Association

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2021

Mailing Address P.O. Box 622227

FEC Identification Number

C	C00146506
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City Orlando State FL Zip Code 32862

Transaction ID : SB21B.11988

Purpose of Disbursement
Bank Fee

001
Category/ Type

Amount of Each Disbursement this Period

10.00

Candidate Name

National Court Reporters Association

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

B. SunTrust Bank

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2021

Mailing Address P.O. Box 622227

FEC Identification Number

C	C00146506
---	-----------

City Orlando State FL Zip Code 32862

Transaction ID : SB21B.11989

Purpose of Disbursement
Bank Fee

001
Category/ Type

Amount of Each Disbursement this Period

25.00

Candidate Name

National Court Reporters Association

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

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

FEC Identification Number

C	
---	--

City State Zip Code

Amount of Each Disbursement this Period

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Purpose of Disbursement

Category/ Type

Candidate Name

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

Memo Item

State: District:

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

35.00

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

116.00
