

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
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1. NAME OF COMMITTEE (In full) **TYPE OR PRINT ▼** Example: if typing, type over the lines.

12FE4M5

MODERN REPUBLICANS

ADDRESS (number and street) 732 EDEN WAY N
SUITE E
CHESAPEAKE VA 23320

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER ▼** CITY ▲ STATE ▲ ZIP CODE ▲

C 00558379

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT**
(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of []

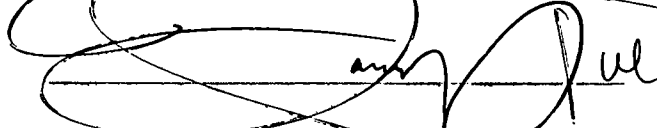
(d) 30-Day POST-Election Report for the:

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

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]

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

Signature of Treasurer  Date [MM] / [DD] / [YYYY]

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

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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

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"/>		4421.41
(b) Cash on Hand at Beginning of Reporting Period.....	3831.86	
(c) Total Receipts (from Line 19).....	3916.91	4723.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7748.77	9144.53
7. Total Disbursements (from Line 31).....	3415.00	4810.76
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	4333.77	4333.77
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

For further information contact:

Federal Election Commission
1050 First Street, N.E.
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2019 To: MM / DD / YYYY 12 / 31 / 2019

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).....	1515.49	2015.49
(ii) Unitemized.....	2056.42	2362.63
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3571.91	4378.12
(b) Political Party Committees.....	345.00	345.00
(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).....▶	3916.91	4723.12
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)).....▶	3916.91	4723.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3916.91	4723.12

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	3415.00	4565.76	
(b) Other Federal Operating Expenditures	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3415.00	4565.76	
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	245.00	
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)) ..	3415.00	4565.76	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	0.00	0.00	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	3916.91	4723.12
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3916.91	4723.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FORM 3X (REV. 05/2016)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 1 OF 2	
	(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"/> 15
<input type="checkbox"/> 12	<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)
MODERN REPUBLICANS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name KRUPP, PATTYANNE		Date of Receipt 12 / 19 / 2019
Mailing Address 1302 Greens Edge Court		Amount of Each Receipt this Period 500.00
City Chesapeake	State VA	
Zip Code 23320		Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	Aggregate Year-to-Date ▼ 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name MARXRIESER, DACIA		Date of Receipt 12 / 19 / 2019
Mailing Address 1520 Pine Grove Lane		Amount of Each Receipt this Period 250.00
City Chesapeake	State VA	
Zip Code 23321		Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) MDT, Inc.	Occupation (for Individual) Controller	Aggregate Year-to-Date ▼ 297.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name FREE, CYNTHIA		Date of Receipt 12 / 19 / 2019
Mailing Address 2348 Huckleberry Trail		Amount of Each Receipt this Period 209.21
City Virginia Beach	State VA	
Zip Code 23456		Memo Item
FEC ID number of contributing federal political committee. C		
Name of Employer (for Individual) Atlantic Orthopedic Therapists	Occupation (for Individual) Physical Therapist	Aggregate Year-to-Date ▼ 209.21
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....▶	959.21
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 2 OF 2

<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)

MODERN REPUBLICANS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name AMICK, TAMMI		Date of Receipt 12 / 19 / 2019
Mailing Address 1524 Chesapeake Avenue		Amount of Each Receipt this Period 307.91
City Chesapeake	State VA	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer (for Individual) None	Occupation (for Individual) N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.91	

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name EWELL, JUDY		Date of Receipt 12 / 19 / 2019
Mailing Address 2036 Sanderson Road		Amount of Each Receipt this Period 248.47
City Chesapeake	State VA	
FEC ID number of contributing federal political committee. C		Memo Item
Name of Employer (for Individual) SUPPLY ROOM	Occupation (for Individual) Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	

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

SUBTOTAL of Receipts This Page (optional).....	556.28
TOTAL This Period (last page this line number only).....	1515.49

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

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

FOR LINE NUMBER: PAGE **1** OF **1**
(check only one)

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

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NAME OF COMMITTEE (In Full)

MODERN REPUBLICANS

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
COSGROVE FOR SENATE

Mailing Address
P.O. BOX 15483

City **Chesapeake** State **VA** Zip Code **23328**

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

Name of Employer (for Individual) **VA State** Occupation (for Individual) **Senator**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **345.00**

Date of Receipt
12 / 19 / 2019

Amount of Each Receipt this Period
345.00

Memo Item

B. 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

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	345.00
TOTAL This Period (last page this line number only).....	345.00

**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)

MODERN REPUBLICANS

Full Name (Last, First, Middle Initial)

A. JOE POZERYCHI, JR.

Mailing Address

25 Lincoln Circle East

City
Andover

State
MA

Zip Code
01810

Purpose of Disbursement
Office supplies

004

Candidate Name

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

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

08 / 14 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

355.00

Memo Item

Full Name (Last, First, Middle Initial)

B. MERMAID WINERY

Mailing Address

330 W. 22nd STREET

City
NORFOLK

State
VA

Zip Code
23517

Purpose of Disbursement
Event/ Site Fee

003

Candidate Name

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

Disbursement For: Primary General Other (specify)

Date of Disbursement

12 / 19 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

1961.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CRYSTAL IMAGE

Mailing Address

680 South Ridge Road

City
York Springs

State
PA

Zip Code
17372

Purpose of Disbursement
Advertisement

004

Candidate Name

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

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

12 / 19 / 2019

FEC Identification Number

C

Amount of Each Disbursement this Period

800.00

Memo Item

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

3116.00

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

3116.00

emely Urgent

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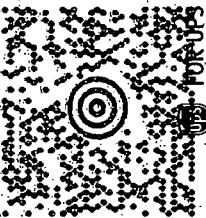
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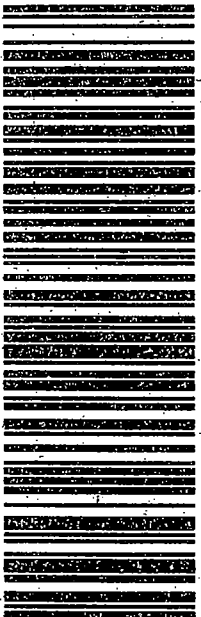


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NON-PROFIT ORGANIZATION

Federal Election Commission
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): UPS	Shipping Date 1/31/20
	Next Business Day Delivery <input checked="" type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
PREPARER MP	2/3/20 DATE PREPARED

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