

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
The New Republican Majority Fund

ADDRESS (number and street) P.O. Box 53176
 Check if different than previously reported. (ACC)
Washington DC 20009

2. **FEC IDENTIFICATION NUMBER** C00219220
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 Quarterly 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 (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 07 01 2009 through 12 31 2009

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 Mr. Bret K., Boyles

Signature of Treasurer Electronically Filed by Mr. Bret K., Boyles Date 01 21 2010

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

Please note that all of the operating expenditures detailed in this report were made on behalf of this committee and not for any candidate or other individual. This report includes all operating expenditures for administrative expenses during the reporting period.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
The New Republican Majority Fund

Report Covering the Period: From:

M M	D D	Y Y Y Y
0 7	0 1	2 0 0 9

 To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 0 9</td></tr></table>	Y Y Y Y	2 0 0 9		928342.65
Y Y Y Y				
2 0 0 9				
(b) Cash on Hand at Beginning of Reporting Period	761429.82			
(c) Total Receipts (from Line 19)	6813.83	17397.37		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	768243.65	945740.02		
7. Total Disbursements (from Line 31)	109385.81	286882.18		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	658857.84	658857.84		
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
999 E street, NW
Washington, DC 20463

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
The New Republican Majority Fund

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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	7000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6813.83	10397.37
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 Transfer (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))	6813.83	17397.37
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6813.83	17397.37

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	45385.81	123632.18
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	45385.81	123632.18
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	54000.00	140000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	10000.00	23250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	109385.81	286882.18
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	109385.81	286882.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	45385.81	123632.18
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	45385.81	123632.18

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 31

(check only one)

<input 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 checked="" type="checkbox"/> 16

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)
The New Republican Majority Fund

A.

Full Name (Last, First, Middle Initial)

Hancock Bank

Mailing Address P.O. Box 4819

City State Zip Code
Gulfport MS 39502

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3593.64

Date of Receipt

M M / D D / Y Y Y Y Y
07 / 31 / 2009

Transaction ID: 31134458

Amount of Each Receipt this Period

10.10

Interest Income

B.

Full Name (Last, First, Middle Initial)

Hancock Bank

Mailing Address P.O. Box 4819

City State Zip Code
Gulfport MS 39502

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3602.25

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 31 / 2009

Transaction ID: 31134459

Amount of Each Receipt this Period

8.61

Interest Income

C.

Full Name (Last, First, Middle Initial)

Hancock Bank

Mailing Address P.O. Box 4819

City State Zip Code
Gulfport MS 39502

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3609.79

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2009

Transaction ID: 31134460

Amount of Each Receipt this Period

7.54

Interest Income

SUBTOTAL of Receipts This Page (optional)

26.25

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 8 / 31
	<input 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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.	Full Name (Last, First, Middle Initial) Hancock Bank		Date of Receipt
	Mailing Address P.O. Box 4819		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Gulfport	MS	39502
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 31134461
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="3610.20"/>	
			Amount of Each Receipt this Period
			<input type="text" value="0.41"/>
			Interest Income

B.	Full Name (Last, First, Middle Initial) Hancock Bank		Date of Receipt
	Mailing Address P.O. Box 4819		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Gulfport	MS	39502
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 31134462
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="3614.76"/>	
			Amount of Each Receipt this Period
			<input type="text" value="4.56"/>
			Interest Income

C.	Full Name (Last, First, Middle Initial) Hancock Bank		Date of Receipt
	Mailing Address P.O. Box 4819		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Gulfport	MS	39502
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: 31134463
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="3616.34"/>	
			Amount of Each Receipt this Period
			<input type="text" value="1.58"/>
			Interest Income

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6.55"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 31
(check only one)

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

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A. Full Name (Last, First, Middle Initial)
Hancock Bank

Mailing Address P.O. Box 4819

City State Zip Code
Gulfport MS 39502

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3618.64

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: 31134464

Amount of Each Receipt this Period
2.30

Interest Income

B. Full Name (Last, First, Middle Initial)
Hancock Bank

Mailing Address P.O. Box 4819

City State Zip Code
Gulfport MS 39502

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3621.65

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 9

Transaction ID: 31134465

Amount of Each Receipt this Period
3.01

Interest Income

C. Full Name (Last, First, Middle Initial)
Hancock Bank

Mailing Address P.O. Box 4819

City State Zip Code
Gulfport MS 39502

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3623.26

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 9

Transaction ID: 31134466

Amount of Each Receipt this Period
1.61

Interest Income

SUBTOTAL of Receipts This Page (optional) ► **6.92**

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 10 / 31
	(check only one)	
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.

Full Name (Last, First, Middle Initial) Hancock Bank		Date of Receipt
Mailing Address P.O. Box 4819		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Gulfport MS 39502		<input type="text"/> 1 2 / <input type="text"/> 3 1 / <input type="text"/> 2 0 0 9
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: 31134467
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 6.58
Aggregate Year-to-Date ▼ <input type="text"/> 3629.84		Interest Income

B.

Full Name (Last, First, Middle Initial) Hancock Bank		Date of Receipt
Mailing Address P.O. Box 4819		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Gulfport MS 39502		<input type="text"/> 1 2 / <input type="text"/> 3 1 / <input type="text"/> 2 0 0 9
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		Transaction ID: 31191352
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 6767.53
Aggregate Year-to-Date ▼ <input type="text"/> 10397.37		Interest Income

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 6774.11
TOTAL This Period (last page this line number only)	<input type="text"/> 6813.83

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Solutions</p> <p>Mailing Address P.O. Box 53176</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Consultant - Accounting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134391</p> <p>Date of Disbursement 07 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>001 Category/ Type</p> <p>Consultant - Accounting</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Solutions</p> <p>Mailing Address P.O. Box 53176</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Consultant - Accounting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134393</p> <p>Date of Disbursement 08 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>001 Category/ Type</p> <p>Consultant - Accounting</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Solutions</p> <p>Mailing Address P.O. Box 53176</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Consultant - Accounting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134394</p> <p>Date of Disbursement 09 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>001 Category/ Type</p> <p>Consultant - Accounting</p>

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)

PAGE 12 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Solutions</p> <p>Mailing Address P.O. Box 53176</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Consultant - Accounting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134395 Date of Disbursement 10 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>001 Category/ Type</p> <p>Consultant - Accounting</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Solutions</p> <p>Mailing Address P.O. Box 53176</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Consultant - Accounting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134396 Date of Disbursement 11 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>001 Category/ Type</p> <p>Consultant - Accounting</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Campaign Finance Solutions</p> <p>Mailing Address P.O. Box 53176</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Consultant - Accounting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134397 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>001 Category/ Type</p> <p>Consultant - Accounting</p>

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)

PAGE 13 / 31

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.	Full Name (Last, First, Middle Initial) Campaign Finance Solutions	Transaction ID: 31134398
	Mailing Address P.O. Box 53176	Date of Disbursement 12 / 15 / 2009
	City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Consultant - Accounting	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Consultant - Accounting

B.	Full Name (Last, First, Middle Initial) Hancock Bank	Transaction ID: 31134400
	Mailing Address P.O. Box 4819	Date of Disbursement 10 / 30 / 2009
	City Gulfport State MS Zip Code 39502	Amount of Each Disbursement this Period 0.44
	Purpose of Disbursement Bank Service Charge	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Bank Service Charge

C.	Full Name (Last, First, Middle Initial) Hancock Bank	Transaction ID: 31134401
	Mailing Address P.O. Box 4819	Date of Disbursement 10 / 23 / 2009
	City Gulfport State MS Zip Code 39502	Amount of Each Disbursement this Period 146.24
	Purpose of Disbursement Bank Service Charge	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Bank Service Charge

SUBTOTAL of Disbursements This Page (optional)	5146.68
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.	Full Name (Last, First, Middle Initial) Patton Boggs, LLP	Transaction ID: 31134402
	Mailing Address 2550 M Street, NW	Date of Disbursement 12 / 15 / 2009
	City Washington State DC Zip Code 20037	Amount of Each Disbursement this Period 257.32
	Purpose of Disbursement Professional Services - Legal Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Professional Services - Legal

B.	Full Name (Last, First, Middle Initial) Patton Boggs, LLP	Transaction ID: 31134403
	Mailing Address 2550 M Street, NW	Date of Disbursement 10 / 19 / 2009
	City Washington State DC Zip Code 20037	Amount of Each Disbursement this Period 137.13
	Purpose of Disbursement Professional Services - Legal Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Professional Services - Legal

C.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: 31134404
	Mailing Address P.O. Box 114	Date of Disbursement 12 / 09 / 2009
	City Jackson State MS Zip Code 39205	Amount of Each Disbursement this Period 2606.42
	Purpose of Disbursement See Memo Entries Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		See Memo Entries

SUBTOTAL of Disbursements This Page (optional)	3000.87
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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address P.O. Box 114

City Jackson State MS Zip Code 39205

Purpose of Disbursement
Travel Expense - See Memo Entry

Candidate Name

002
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 31134406
Date of Disbursement

09 / 10 / 2009

Amount of Each Disbursement this Period

483.80

Travel Expense - See Memo Entry

B.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address P.O. Box 114

City Jackson State MS Zip Code 39205

Purpose of Disbursement
Travel Expense-See Memo Entry

Candidate Name

002
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 31134407
Date of Disbursement

09 / 10 / 2009

Amount of Each Disbursement this Period

967.60

Travel Expense-See Memo Entry

C.

Full Name (Last, First, Middle Initial)
Vocus

Mailing Address 4296 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement
Software Expense

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 31134408
Date of Disbursement

09 / 10 / 2009

Amount of Each Disbursement this Period

6500.00

Software Expense

SUBTOTAL of Disbursements This Page (optional) ▶

7951.40

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation Mailing Address P.O. Box 1777 City Richmond State VA Zip Code 23218 Purpose of Disbursement Void Uncashed Check Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31134448 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9	Amount of Each Disbursement this Period -2027.40 Void Uncashed Check
B.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation Mailing Address P.O. Box 1777 City Richmond State VA Zip Code 23218 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31134449 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9	Amount of Each Disbursement this Period 1233.81 Taxes
C.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation Mailing Address P.O. Box 1777 City Richmond State VA Zip Code 23218 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31134450 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 9	Amount of Each Disbursement this Period 60.00 Taxes

SUBTOTAL of Disbursements This Page (optional)	-733.59
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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

<p>A. Full Name (Last, First, Middle Initial) Mississippi Tax Commission</p> <p>Mailing Address P.O. Box 1033</p> <p>City Jackson State MS Zip Code 39215</p> <p>Purpose of Disbursement Void Uncashed Check</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134453 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period -314.00</p> <p>001 Category/ Type</p> <p>Void Uncashed Check</p>
<p>B. Full Name (Last, First, Middle Initial) Mississippi Tax Commission</p> <p>Mailing Address P.O. Box 1033</p> <p>City Jackson State MS Zip Code 39215</p> <p>Purpose of Disbursement Reissue Uncashed Check</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134454 Date of Disbursement 12 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 314.00</p> <p>001 Category/ Type</p> <p>Reissue Uncashed Check</p>
<p>C. Full Name (Last, First, Middle Initial) Williamsburg Inn</p> <p>Mailing Address P.O. Box 1776</p> <p>City Williamsburg State VA Zip Code 23187</p> <p>Purpose of Disbursement Lodging Expense See Visa Txn. of 9/10/09</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31198544 Date of Disbursement 09 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 483.80</p> <p>002 Category/ Type</p> <p>[MEMO ITEM] Lodging Expense See Visa Txn. of 9/10/09</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

<p>A. Full Name (Last, First, Middle Initial) Williamsburg Inn</p> <p>Mailing Address P.O. Box 1776</p> <p>City Williamsburg State VA Zip Code 23187</p> <p>Purpose of Disbursement Lodging Expense See Visa Txn. of 9/10/09</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31198545 Date of Disbursement 09 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 967.60</p> <p>[MEMO ITEM] Lodging Expense See Visa Txn. of 9/10/09</p>
<p>B. Full Name (Last, First, Middle Initial) USAirways</p> <p>Mailing Address 4000 E. Sky Harbor Blvd.</p> <p>City Phoenix State AZ Zip Code 85034</p> <p>Purpose of Disbursement Travel Expense See Visa Txn. of 12/9/09</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31198547 Date of Disbursement 12 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 436.20</p> <p>[MEMO ITEM] Travel Expense See Visa Txn. of 12/9/09</p>
<p>C. Full Name (Last, First, Middle Initial) USAirways</p> <p>Mailing Address 4000 E. Sky Harbor Blvd.</p> <p>City Phoenix State AZ Zip Code 85034</p> <p>Purpose of Disbursement Travel Expenses See Visa Txn. of 12/9/09</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31198548 Date of Disbursement 12 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 436.20</p> <p>[MEMO ITEM] Travel Expenses See Visa Txn. of 12/9/09</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.

Full Name (Last, First, Middle Initial)
The Cloister

Mailing Address 100 Salt Marsh Lane

City State Zip Code
St. Simons Island GA 31522

Purpose of Disbursement
Lodging Expense See Visa Txn. of 12/9/09

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 31198549

Date of Disbursement

12 / 09 / 2009

Amount of Each Disbursement this Period

1734.02

[MEMO ITEM]

Lodging Expense See Visa
Txn. of 12/9/09

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

45365.36

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.	Full Name (Last, First, Middle Initial) Alamo PAC	Transaction ID: 31134419 Date of Disbursement 07 / 14 / 2009
	Mailing Address 919 Congress Avenue Suite 1400, Frost Bank Plaza	Amount of Each Disbursement this Period 1000.00
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement 2009 Contribution Candidate Name Alamo PAC Category/Type 011	
	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:	2009 Contribution

B.	Full Name (Last, First, Middle Initial) Carly For California Inc	Transaction ID: 31134422 Date of Disbursement 11 / 12 / 2009
	Mailing Address 455 Capitol Mall Suite 801	Amount of Each Disbursement this Period 1000.00
	City Sacramento State CA Zip Code 95814	
	Purpose of Disbursement 2010 Primary Candidate Name Carly Fiorina Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District:	2010 Primary

C.	Full Name (Last, First, Middle Initial) Castle Campaign Fund	Transaction ID: 31134423 Date of Disbursement 10 / 19 / 2009
	Mailing Address PO Box 133	Amount of Each Disbursement this Period 1000.00
	City Wilmington State DE Zip Code 19899	
	Purpose of Disbursement 2010 Primary Candidate Name Mr. Michael Castle Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: DE District:	2010 Primary

SUBTOTAL of Disbursements This Page (optional)	3000.00
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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

<p>A. Full Name (Last, First, Middle Initial) David Vitter For Us Senate</p> <p>Mailing Address PO Box 8175</p> <p>City Metairie State LA Zip Code 70011</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Sen. David Vitter</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134424 Date of Disbursement: 10 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>011 Category/Type</p> <p>2010 Primary</p>
<p>B. Full Name (Last, First, Middle Initial) David Vitter For Us Senate</p> <p>Mailing Address PO Box 8175</p> <p>City Metairie State LA Zip Code 70011</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Sen. David Vitter</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134425 Date of Disbursement: 10 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/Type</p> <p>2010 General</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Andy Barr Exploratory Committee</p> <p>Mailing Address P.O. Box 2059</p> <p>City Lexington State KY Zip Code 40509</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Andy Barr</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 06</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134426 Date of Disbursement: 09 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/Type</p> <p>2010 Primary</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9500.00

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

<p>A. Full Name (Last, First, Middle Initial) Friends of John McCain</p> <p>Mailing Address P.O. Box 16664</p> <p>City Arlington State VA Zip Code 22215</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name John McCain</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134427 Date of Disbursement 10 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p> <p>2010 General</p>
<p>B. Full Name (Last, First, Middle Initial) Friends Of John Thune</p> <p>Mailing Address 200 North Phillips Avenue Ste L101</p> <p>City Sioux Falls State SD Zip Code 57104</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Sen. John Thune</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134428 Date of Disbursement 07 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>2010 Primary</p>
<p>C. Full Name (Last, First, Middle Initial) Friends Of Kelly Ayotte</p> <p>Mailing Address PO Box 233</p> <p>City Nashua State NH Zip Code 03061</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Kelly Ayotte</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134429 Date of Disbursement 09 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p> <p>2010 Primary</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.	Full Name (Last, First, Middle Initial) Friends Of Trey Grayson Mailing Address PO Box 175726 City Ft Mitchell State KY Zip Code 41017 Purpose of Disbursement 2010 Primary Candidate Name Trey Grayson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District:	Transaction ID: 31134430 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) Georgians For Isakson Mailing Address Post Office Box 250116 City Atlanta State GA Zip Code 30325 Purpose of Disbursement 2010 Primary Candidate Name Sen. Johnny Isakson Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District:	Transaction ID: 31134431 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) Grassley Committee Inc Mailing Address PO Box 1000 City Des Moines State IA Zip Code 50304 Purpose of Disbursement 2010 Primary Candidate Name Sen. Charles Grassley Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District:	Transaction ID: 31134432 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 9	Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

<p>A. Full Name (Last, First, Middle Initial) Grassley Committee Inc</p> <p>Mailing Address PO Box 1000</p> <p>City Des Moines State IA Zip Code 50304</p> <p>Purpose of Disbursement 2010 General</p> <p>Candidate Name Sen. Charles Grassley</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IA District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134433</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p> <p>2010 General</p>
<p>B. Full Name (Last, First, Middle Initial) Gregg Harper For Congress</p> <p>Mailing Address Post Office Box 54344</p> <p>City Pearl State MS Zip Code 39288</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Mr. Gregg Harper</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MS District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134434</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p>2010 Primary</p>
<p>C. Full Name (Last, First, Middle Initial) Hal Rogers For Congress</p> <p>Mailing Address P.O. Box 1214 East Mt Vernon St</p> <p>City Somerset State KY Zip Code 42502</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Rep. Harold Rogers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: KY District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134435</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p> <p>2010 Primary</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.

Full Name (Last, First, Middle Initial)
Jane Norton For Colorado Inc

Transaction ID: 31134438
Date of Disbursement

Mailing Address 8006 East Arapahoe Road Suite 150
Room 925

09 / 10 / 2009

City Centennial State CO Zip Code 80112

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
2010 Primary

011
Category/
Type

Candidate Name
Jane Norton

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

2010 Primary

State: CO District:

B.

Full Name (Last, First, Middle Initial)
Nunnelee For Congress

Transaction ID: 31134440
Date of Disbursement

Mailing Address 438 East Main St
PO Box 7092

11 / 17 / 2009

City Tupelo State MS Zip Code 38802

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
2010 Primary

011
Category/
Type

Candidate Name
Mr. Patrick Nunnelee

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

2010 Primary

State: MS District: 01

C.

Full Name (Last, First, Middle Initial)
Portman For Senate Committee

Transaction ID: 31134441
Date of Disbursement

Mailing Address 8331 Little Harbor Drive

12 / 15 / 2009

City Cincinnati State OH Zip Code 45244

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
2010 Primary

011
Category/
Type

Candidate Name
Mr. Rob Portman

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

2010 Primary

State: OH District:

SUBTOTAL of Disbursements This Page (optional)

8500.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.	Full Name (Last, First, Middle Initial) Portman For Senate Committee Mailing Address 8331 Little Harbor Drive City Cincinnati State OH Zip Code 45244 Purpose of Disbursement 2010 General Candidate Name Mr. Rob Portman Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District:	Transaction ID: 31134442 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9	Amount of Each Disbursement this Period 5000.00 2010 General
B.	Full Name (Last, First, Middle Initial) Shelby For U S Senate Mailing Address Post Office Box 1091 City Tuscaloosa State AL Zip Code 35403 Purpose of Disbursement 2010 Primary Candidate Name Sen. Richard Shelby Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District:	Transaction ID: 31134443 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 9	Amount of Each Disbursement this Period 2000.00 2010 Primary
C.	Full Name (Last, First, Middle Initial) Tenn PAC Mailing Address 228 South Washington Street Suite 115 City Alexandria State VA Zip Code 22314 Purpose of Disbursement 2009 Contribution Candidate Name Tenn PAC 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:	Transaction ID: 31134444 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 1500.00 2009 Contribution

SUBTOTAL of Disbursements This Page (optional)	8500.00
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

<p>A. Full Name (Last, First, Middle Initial) Tiberi For Congress</p> <p>Mailing Address 2931 E Dublin Granville Road Suite 190</p> <p>City Columbus State OH Zip Code 43231</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Rep. Patrick Tiberi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 12</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134445 Date of Disbursement 10 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>2010 Primary</p>
<p>B. Full Name (Last, First, Middle Initial) Toomey For Senate Committee</p> <p>Mailing Address 2720 Jordan Road</p> <p>City Orefield State PA Zip Code 18069</p> <p>Purpose of Disbursement 2010 Primary</p> <p>Candidate Name Mr. Patrick Toomey</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: PA District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134446 Date of Disbursement 11 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>2010 Primary</p>
<p>C. Full Name (Last, First, Middle Initial) White Mountain PAC</p> <p>Mailing Address P.O. Box 1772</p> <p>City Concord State NH Zip Code 03302</p> <p>Purpose of Disbursement 2009 Contribution</p> <p>Candidate Name White Mountain PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31134447 Date of Disbursement 11 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>2009 Contribution</p>

SUBTOTAL of Disbursements This Page (optional)	3000.00
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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A.

Full Name (Last, First, Middle Initial)
Republican Majority Fund

Mailing Address P.O. Box 144

City Alexandria State VA Zip Code 22313

Purpose of Disbursement
Void - Republican Majority Fund

Candidate Name
Republican Majority Fund

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 31134456

Date of Disbursement

^M <input type="text"/> 1	^M <input type="text"/> 2	/	^D <input type="text"/> 0	^D <input type="text"/> 8	/	^Y <input type="text"/> 2	^Y <input type="text"/> 0	^Y <input type="text"/> 0	^Y <input type="text"/> 9
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Amount of Each Disbursement this Period

-1000.00

Category/
Type

Void - Republican Majority
Fund

SUBTOTAL of Disbursements This Page (optional) ▶

-1000.00

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

54000.00

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A. Full Name (Last, First, Middle Initial) Brownback for Governor <hr/> Mailing Address P.O. Box 3739 <hr/> City Topeka State KS Zip Code 66604 <hr/> Purpose of Disbursement Sam Brownback, GOVERNOR KS Candidate Name Sam Brownback <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 31134420 Date of Disbursement 11 / 17 / 2009
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Sam Brownback, GOVERNOR KS

B. Full Name (Last, First, Middle Initial) Mike DeWine for Ohio <hr/> Mailing Address 2587 Conley Road <hr/> City Cedarville State OH Zip Code 45314 <hr/> Purpose of Disbursement Mike DeWine, ATTORNEY GENERAL OH Candidate Name Mike DeWine <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 31134439 Date of Disbursement 11 / 04 / 2009
	Amount of Each Disbursement this Period 500.00
	Category/ Type 011
	Mike DeWine, ATTORNEY GEN- ERAL OH

C. Full Name (Last, First, Middle Initial) Jim Smith for Supreme Court Judge <hr/> Mailing Address 161 Pole Bridge Road <hr/> City Brandon State MS Zip Code 39042 <hr/> Purpose of Disbursement Void - Jim Smith for Supreme Court Judge Candidate Name Jim Smith <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 31134457 Date of Disbursement 12 / 08 / 2009
	Amount of Each Disbursement this Period -2500.00
	Category/ Type 011
	Void - Jim Smith for Supr- eme Court Judge

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

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
The New Republican Majority Fund

A. Full Name (Last, First, Middle Initial) Butler Snow <hr/> Mailing Address P.O. Box 22567 <hr/> City Jackson State MS Zip Code 39225 <hr/> Purpose of Disbursement <hr/> Candidate Name Phil Bryant <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31189318 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 10000.00 <hr/> Category/Type 011
B. Full Name (Last, First, Middle Initial) Friends of Phil Bryant <hr/> Mailing Address P.O. Box 321226 <hr/> City Flowood State MS Zip Code 39232 <hr/> Purpose of Disbursement Phil Bryant, LT. GOVERNOR MS In-kind, See Butler Snow Transaction <hr/> Candidate Name Phil Bryant <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31198542 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 10000.00 <hr/> Category/Type 011 [MEMO ITEM] Phil Bryant, LT. GOVERNOR MS In-kind, See Butler Snow Transaction

SUBTOTAL of Disbursements This Page (optional) ►

10000.00

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)
The New Republican Majority Fund

A. Full Name (Last, First, Middle Initial) Mr. Manuel H. Johnson, Jr. <hr/> Mailing Address 7990 Delaplane Grade Road <hr/> City Upperville State VA Zip Code 20184 <hr/> Purpose of Disbursement Void Uncashed Check Candidate Name	Transaction ID: 31134451 Date of Disbursement 12 / 08 / 2009 <hr/> Amount of Each Disbursement this Period -400.00 <hr/> Void Uncashed Check
B. Full Name (Last, First, Middle Initial) Mr. Manuel H. Johnson, Jr. <hr/> Mailing Address 7990 Delaplane Grade Road <hr/> City Upperville State VA Zip Code 20184 <hr/> Purpose of Disbursement Reissue of Uncashed Contribution Refund Check Candidate Name	Transaction ID: 31134452 Date of Disbursement 12 / 08 / 2009 <hr/> Amount of Each Disbursement this Period 400.00 <hr/> Reissue of Uncashed Contribution Refund Check

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